

Exhibit “B”

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF ALABAMA
NORTHERN DIVISION

GERALD RUHNOW; CONNIE
RUHNOW,

Plaintiffs,

V.

LANE HEARD TRUCKING, et. al.

Defendants.

NORTHLAND INSURANCE CO.

Intervener,

V.

LANE HEARD TRUCKING, et. al.

Defendants.

NORTHLAND'S INITIAL DISCLOSURES

COMES NOW Northland Insurance Company, (“Northland”), intervener in the above-styled action and, pursuant to Rule 26 of the Federal Rules of Civil

Will Smith, adjuster hired by Northland to compute the damages to the truck and tractor. He has knowledge of Northland's damages as a result of the accidents that are the subject of this complaint.

Northland also incorporates by reference the witnesses identified by other parties to this action in their Initial Disclosures.

B. Make available to other parties under Federal Rule of Civil Procedure 34 all documents, data compilations and tangible things that may be used to support contentions in this case.

The Northland policy issued to Mr. Ruhnow, which has already been produced as an attachment to Northland's complaint.

Report of Will Marvin regarding the damages suffered by Northland, attached.

Photos of accident scene and truck insured by Willard Smith, attached.

Accident photos from the Alabama Department of Transportation (previously produced by Mr. and Mrs. Ruhnow.

Affidavit of Gene Richardson (previously produced by Mr. and Mrs. Ruhnow.)

Accident report (previously produced by Mr. and Mrs. Ruhnow.)

Non-privileged portions of Northland's claim file, attached.

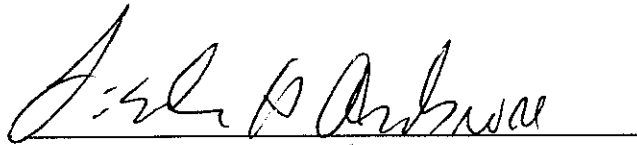
C. Computation of the damages claimed.

| | |
|---------------|--|
| \$ 101,115.00 | actual cash value of tractor plus 7% tax |
| 9,411.75 | towing charges |
| 12,000.00 | actual cash value of tractor |
| 3,655.00 | replacement of fire suits for Troy Fire Department |
| (3,435.00) | salvage and deductible |
| \$122,746.75 | TOTAL |

D. Production of Insurance Agreements in Question.

The insurance policy issued by Northland to Mr. Ruhnow has already been produced, as an attachment to Northland's complaint.

This 18th day of July, 2006.



Linda Hinson Ambrosé, Esq.

ASB 1753-B386

Attorney for Northland Insurance Co.

OF COUNSEL:

ROGERS AND ASSOCIATES
3000 Riverchase Galleria, Suite 650
Birmingham, Alabama 35242
(205) 982-4620
(205) 982-4630 (fax)

CERTIFICATE OF SERVICE

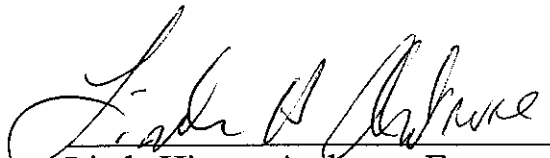
I hereby certify that I have this day served upon counsel for all concerned parties a copy of the within and foregoing Northland Insurance Company's Initial Disclosures by depositing a copy of the same in the United States Mail in a properly addressed envelope with sufficient postage affixed thereto, addressed as follows:

Robert C. Ward, Jr., Esq.
RUSHTON, STAKELY, JOHNSTON
& GARRETT, P.A.
P.O. Box 270
Montgomery, Al. 36101-0270
Counsel for Defendant, Christy Leann Champion

J. Burrus Riss, Esq.
Katie Hammett, Esq.
HAND ARENDALL
P.O. Box 123
Mobile, Alabama 36601
Counsel for Defendant Lane Heard Trucking

Stephen D. Heninger, Esq.
HENINGER, GARRISON & VARGO, LLC
Po Box 11310
Birmingham, Alabama 35201
Counsel for Plaintiffs, Gerald and Connie Ruhnnow

This 18th day of July, 2006.


Linda Hinson Ambrose, Esq.

THE MATERIAL CONTAINED IN THIS REPORT

IS

CONFIDENTIAL

**THIS REPORT IS A
CONFIDENTIAL
INVESTIGATION. THE
CONTENTS OF THIS REPORT
ARE NOT TO BE RELEASED
TO THE PUBLIC WITHOUT
COMPLYING WITH T12-21-3.1
OF THE ALABAMA CODE**

THI-3

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT

DATE: _____

LOG #: _____

INDEX

| Item Number | Number of Pages | Description |
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| 2) | 1 | Confidentiality Sheet |
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| 4) | 4 | Case Summary |
| 5) | 1 | Witness List |
| 6) | 1 | Scale Diagram |
| 7) | 1 | Collision Site Information |
| 8) | 2 | Background Information |
| 9) | 1 | Victim Information |
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| 11) | 1 | Drivers Histories |
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Case Number - AST 38-05-059HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT

DATE: _____

LOG #: _____

Alabama Department of
Public Safety

REPLY MAY BE MADE TO:

Traffic Homicide Investigator's Case Summary

AST-38-05-059

Identification

A two vehicle angular head-on crash occurring on U.S. 231 just north of Brundidge, in Pike County, Alabama. This crash occurred at approximately 7:16 pm on Monday, March 7, 2005. It resulted in the death of one adult male and caused serious injury to one adult male.

Involvements

Vehicle One — A 2001 Freightliner tractor-trailer commercial vehicle, white in color, vehicle identification number 1FUPCSZB01LG233001. This vehicle was displaying a Mississippi license plate which was destroyed beyond recognition.

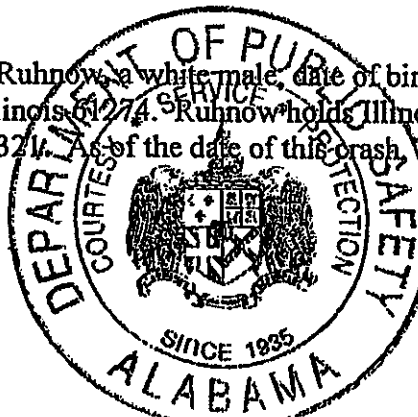
Driver One - Michael Duke, a white male, date of birth 01/12/1968, of 467 Longview Road, Pontotoc, Mississippi 38863. Duke holds Mississippi commercial driver's license number 800063742. As of the date of this crash, his privilege to operate a commercial vehicle is valid.

Occupant - None

Vehicle Two - A 2003 Peterbilt tractor-trailer commercial vehicle, blue in color, vehicle identification number 1XP5DB9X23D590431. This vehicle was displaying an Illinois license plate, P 429865 with an expiration date of 2006.

Driver Two — Gerald Ruhnow, a white male, date of birth 01/11/1950, of 9655 North 1400 Avenue, Osco, Illinois 61274. Ruhnow holds Illinois commercial driver's license number R500-2925-0321. As of the date of this crash, his privilege to operate a commercial vehicle is valid.

Occupant - None



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Weather Conditions

The National Weather Service reported cloudy skies with light rain. Temperature was sixty-eight degrees Fahrenheit, with winds out of the south at twelve miles per hour. Dewpoint was at fifty-five degrees Fahrenheit; barometric pressure was at 29.64 and steady. These conditions are consistent with observations made at the scene.

Highway

U.S. 231 is a four lane, north south roadway of asphalt construction. The roadway surface at the crash site is in fair condition. Roadway width at the point of collision is approximately forty-eight feet. There is no measurable road grade at the crash location. Roadway shoulders are of sod construction and level with the roadway surface on the southbound side. The northbound roadway shoulder slopes gradually downward toward a shallow drainage ditch that runs parallel to the roadway.

Traffic Control

The speed limit on U.S. 231 is posted at fifty-five miles per hour for both directions of travel. Travel lanes are defined by standard paint stripes. A dashed white stripe indicates that passing is allowed for both directions of travel. Lanes of travel are separated by a center turn lane. White stripes define the roadway edges. All roadway striping is in poor condition and is barely visible under the conditions existing at the time of the crash.



Description of Events

Pre-Crash

On Monday March 7, 2005 at 7:21 P.M. the Dothan Post of the Alabama State Troopers received a report of a two vehicle crash involving a motorcycle from an unidentified caller. Trooper Jimmy Helms was directed to respond and was enroute when the communications officer informed Trooper Helms that another crash involving two commercial vehicles had just occurred at the same location. Trooper Helms arrived on scene at 7:33 P.M. and reported to the communications officer that both commercial vehicles were engulfed in flames. Helms began to conduct an initial investigation into the cause of the first crash when he was informed by medical personnel that there were serious and possible life threatening injuries involved in the second crash. Helms asked

DATE: _____
LOG #: _____

his communications officer to dispatch a traffic homicide investigator. Helms then continued his investigation into the cause of the first crash.

Christy Leann Champion of Troy, Alabama and Michael David Adkins of Brundidge, Alabama were involved in the first crash. Champion stated to Helms that she was attempting to merge from the center turn lane and travel south on U.S. 231 in her 1993 Pontiac Grand Am and did not see the motorcycle already in that lane. The 2004 Yamaha motorcycle was being driven by Michael Adkins who was traveling south on U.S. 231 headed to his residence in Brundidge, Alabama. Mr. Adkins was unable to avoid the sudden improper lane change that Mrs. Champion had just made and struck the rear of her vehicle. Champion stated that after the collision she pulled her vehicle off to the shoulder of road and exited her vehicle to render assistance to Mr. Adkins. She got Mr. Adkins out of the roadway and was leading him over to her car when a commercial vehicle topped the hill. That commercial vehicle was being driven by Michael Duke who was unable to avoid the motorcycle in the roadway. Gerald Ruhnnow was traveling north in his commercial vehicle when another commercial vehicle came into his lane of travel.

As of the date of this report, no pre-crash information could be obtained on either driver of the commercial vehicles. Gerald Ruhnnow is in critical but stable condition at the University of Alabama in Birmingham in the burn unit. The only information obtained on Michael Duke was that he departed his residence in Pontotoc, Mississippi at 7:00 A.M. on March 7, 2005 headed to Florida to deliver furniture.

Crash

Michael Duke's vehicle collided with the motorcycle in the southbound lane of U.S. 231. According to the witnesses, the Duke vehicle ran completely over the motorcycle and got stuck underneath the truck. The truck was dragging the motorcycle when a tremendous amount of sparks began to fly from underneath the truck causing an explosion. The Duke vehicle then traveled across the center-line and into the northbound lane where it collided with the Ruhnnow vehicle that was traveling north at that time. The two commercial vehicles collided in the northbound lane of U.S. 231. The Ruhnnow vehicle struck the Duke vehicle on the passenger side compartment. The principal direction of force came into the passenger compartment of the vehicle and traveled through to the drivers side. The impact caused the second explosion which engulfed both vehicles. The two vehicles came to rest on the north shoulder of the roadway with the Ruhnnow vehicle facing north and the Duke vehicle facing southeast with its trailer overturned on its side.

MISSISSIPPI HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT

DATE: _____

LOG #: _____

Post-Crash

Ruhnnow and Duke were in the vehicles when medical personnel arrived. Michael Duke was able to climb out of his vehicle and get away from the burning truck.

Ruhnnow was assisted from his vehicle by members of Troy Fire and Rescue who had been dispatched to the scene only to find both vehicles engulfed in flames. Ruhnnow and Duke were then transported to Troy Regional Medical Center for treatment. Duke was pronounced dead at 8:30 P.M. by Pike County coroner Jerry Williams. Duke's body was at Troy Regional Medical center in Troy awaiting notification of family members. Gerald Ruhnnow was airlifted to the burn center at UAB hospital.

Trooper Cook began his investigation into the cause of the crash. Cook noticed that the vehicles had been moved and separated prior to his arrival on scene the fire department had separated the vehicles to ensure the flames were completely extinguished. Trooper Cook photographed the overall scene, markings on the roadway and all items of evidence. Cook marked all items of evidence and the final rest position of the vehicles using orange marking paint. Trooper Cook was unable to perform any type of inspection of the vehicles due to the destruction of the vehicles caused by the fire and explosion. Trooper Cook remained at the scene as Jordan's Towing and Jacobs Towing responded to recover the crashed vehicles. The vehicles were then stored at Jordan's Towing and Jacobs Towing in Troy.

Trooper Helms informed Mrs. Champion that due to the severity of injuries that was caused by her initial crash, he would need to get a blood sample from her. She consented to the blood test and was transported to Edge Regional Medical Center by Helms where she signed a consent form and waiver of counsel form in front of Amanda Johnston a registered nurse who drew the blood from Mrs. Champion. After cleaning her arm with betadine, Johnston packaged the blood kit up and turned it over to Helms. Helms drove Champion back to the scene where she got in her vehicle and left. Helms turned the kit over to Cook who mailed it the following day to the forensics lab in Mobile.

On March 8, 2005, beginning at 1:00 pm Trooper Cook and Trooper David McGowan proceeded to the scene of the crash. The troopers used the Total Station Mapping System to prepare a scaled diagram of the collision site. Due to the total loss of both commercial vehicles the troopers were unable to conduct an inspection or prepare a linear perimeter of the vehicles.

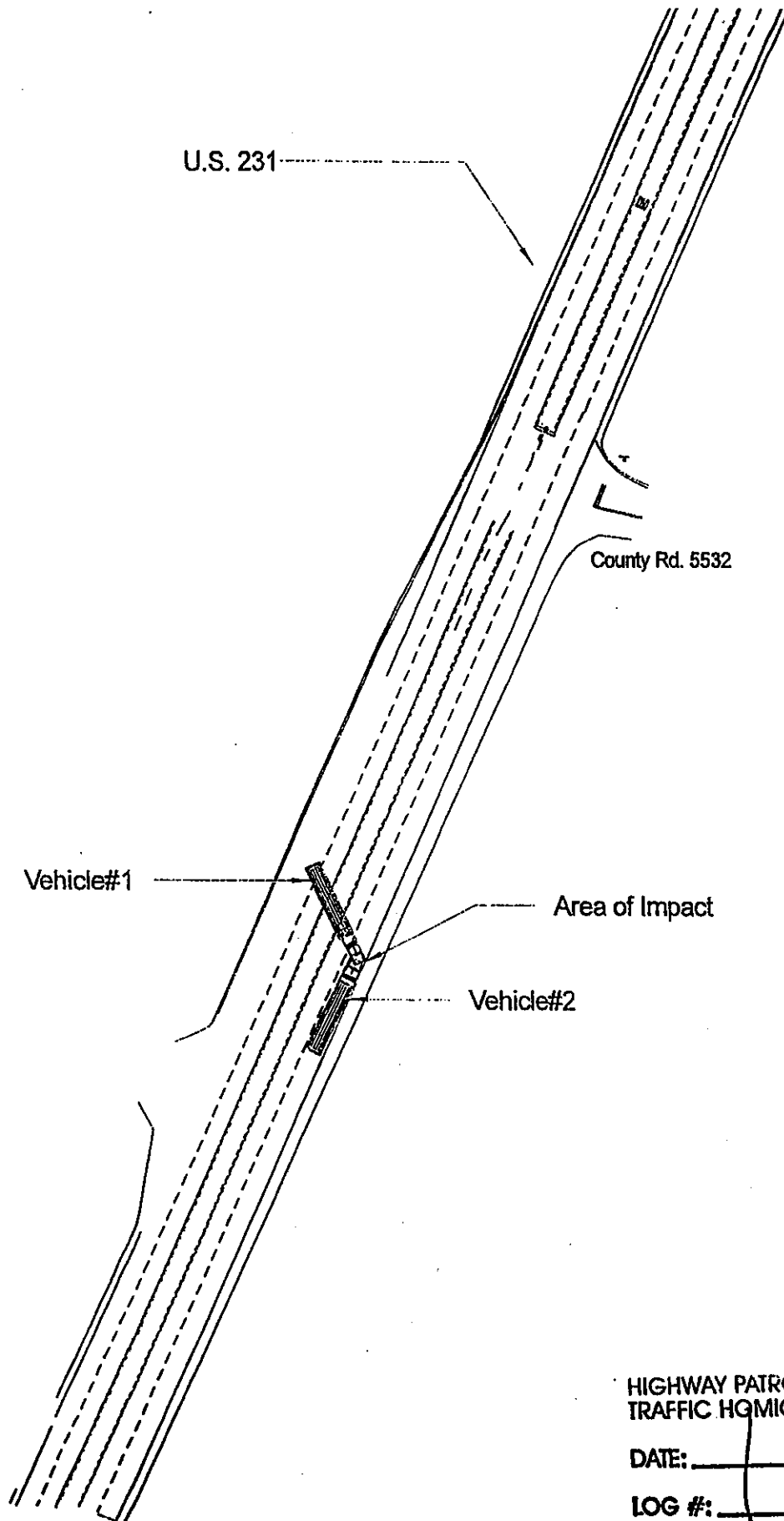
Conclusions and Recommendations

This motor vehicle crash resulted in the fatal injury to Michael Duke, injury to Gerald Ruhnnow and the total loss of two commercial vehicles. Mr. Duke was operating the motor vehicle in complete compliance with all the motor vehicle laws governing the state of Alabama. Based on these findings, it is the recommendation of this investigator that the facts of this case be presented to the next session of the Pike County Grand Jury.

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT

DATE: _____

LOG #: _____



Department of Public Safety
5679 Montgomery Hwy.
Dothan, AL 36303
(334) 983 - 4587

Caption:

Two Vehicle, One Fatality Crash
AST 38 - 05-059
U.S. 231
March 7, 2005

Measured By:

Alabama State Troopers
Traffic Homicide Unit
K. Cook & David C. McGowan

Drawn By:

Alabama State Troopers
Traffic Homicide Unit
Tpt. Kevin Cook
July 13, 2004

Legend

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT

Scale:

DATE: _____

LOG #: _____

0 25 50 75 100 125'

COLLISION SITE INFORMATION

Date of Accident 7 March 2005 Day of Week Monday Time of Day 7:16 ☐ a.m. ☒ p.m.

County Pike City, Town, or Community _____

If accident was outside city limits, indicate distance from nearest town:

_____ feet 5 miles ☐ North ☒ South ☐ East ☐ West of (City, Town) Troy

Road on which accident occurred U.S. 231

At the intersection of _____ If not at intersection

_____ feet .25 miles ☐ North ☒ South ☐ East ☐ West of County Road 5532

No. of Vehicles Involved 2 No. of injured 2 No. of fatalities 1

Traffic Homicide Investigator Notified: Date 7 March 2005 Time 7:56 ☐ a.m. ☒ p.m.

Prosecutor on Scene ☒ Yes ☐ No If yes, name: Bruce Matthews

Forensic Science on Scene ☐ Yes ☒ No If yes, name: _____

Coroner on Scene ☐ Yes ☒ No If yes, name: _____

Other Officers on Scene Sgt. Ken Kelly, Cpl. Tracey Nelson, Trp. Jimmy Helms, Trp. Kevin Cook

Photographs Taken By Trp. Kevin D. Cook

of exposures 30

Video of scene: ☒ YES ☐ NO

Photographs (Other than Investigator) _____

Case Number AST 38-05-059

THI-8

HIGHWAY PATROL DIV.
TRAFFIC HOMICIDE UNIT

DATE: _____

LOG #: _____

BACKGROUND INVESTIGATIONDriver Michael DukePedestrian N/ATrip Began 7:00 ☒ a.m. ☐ p.m. Location _____Purpose of Trip To deliver furniture to FloridaLast Stop Arrived Unknown ☐ a.m. ☐ p.m. Departed Unknown ☐ a.m. ☐ p.m.

Location _____

Purpose _____

PHYSICAL CONDITION☐ Alcohol / Drugs ☐ Yes ☒ No BAC / OTHER: _____

Medical / Other Problems:

☒ None ☐ Vision Temporary Condition or Illness _____☐ Heart Condition ☐ Hearing _____☐ Diabetes ☐ Other (describe) _____☐ Epilepsy**DRIVER'S HISTORY**Familiar With Road ☒ Yes ☐ NoFamiliar With Vehicle ☒ Yes ☐ No21 Years Driving Experience1 Previous Motor Vehicle Traffic Convictions1 Previous Accidents1 Number of suspensions or revocationsRestrictions on Driver License ☐ Yes ☒ No (if yes, explain type) Complied with ☐ Yes ☒ No

Observations: _____

Case Number AST 38-05-059

THI-9

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT

DATE: _____

LOG #: _____

BACKGROUND INVESTIGATIONDriver Gerald RuhnowPedestrian N/ATrip Began Unknown ☐ a.m. ☐ p.m. Location UnknownPurpose of Trip UnknownLast Stop Arrived Unknown ☐ a.m. ☐ p.m. Departed Unknown ☐ a.m. ☐ p.m.Location UnknownPurpose Unknown**PHYSICAL CONDITION**☐ Alcohol / Drugs ☐ Yes ☒ No BAC / OTHER: _____**Medical / Other Problems:**☐ None ☐ Vision Temporary Condition or Illness _____☐ Heart Condition ☐ Hearing _____☐ Diabetes ☐ Other (describe) _____☐ Epilepsy**DRIVER'S HISTORY**Familiar With Road ☐ Yes ☐ NoFamiliar With Vehicle ☐ Yes ☐ No39 Years Driving Experience0 Previous Motor Vehicle Traffic Convictions0 Previous Accidents0 Number of suspensions or revocationsRestrictions on Driver License ☐ Yes ☒ No (if yes, explain type) Complied with ☐ Yes ☐ No

Observations: _____

Case Number AST 38-05-059

THI-9

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT

DATE: _____

LOG #: _____

VICTIM INFORMATION

Vehicle No. 1 Occupant Position Driver Pedestrian N/A
 Name Michael Duke Alias N/A
 Address 467 Longview Road Pontotoc, Ms
 Occupation Truck Driver Home Phone(662) 509-8281 Business Phone ()
 Business Address 1010 Hickory Ridge Drive New Albany, Mississippi
 DOB 01/12/1968 Race W Sex M Height/Weight 6'3 / 250 DL# and State 800063742 / Ms
 Injured yes Fatal yes First Aid By Haynes Ambulance
 injured Transported To Troy Regional Medical Center
 Transported By Haynes Ambulance Autopsy Performed: ☒ Yes ☐ No
 Pronounced By Jerry Williams Date/time 5:30 pm / 7 March 2005
 Cause of Death Multiple blunt force trauma
 Legal Identification Made By Jerry Williams
 Next of Kin Notified Angela Dukes Relation Wife
 Notified By Jerry Williams Date/time 7 March 2005 / 10:45 pm
 Body Released To
 Personal Property Removed By DPS Personnel: ☐ Yes ☒ No
 Ejected: ☐ Yes ☒ No ☐ N/A If yes, through

Vehicle No. 2 Occupant Position Driver Pedestrian N/A
 Name Gerald Ruhnow Alias N/A
 Address 9655 N 1400 Avenue Oscro, Illinois 61274
 Occupation Truck Driver Home Phone() Unknown Business Phone ()
 Business Address 9655 N 1400 Avenue Oscro, IL
 DOB 01/11/1950 Race W Sex M Height/Weight 57 / 190 DL# and State R500-2925-0321 / ILL
 Injured yes Fatal NO First Aid By Haynes Ambulance
 injured Transported To Troy Regional Medical Center
 Transported By Haynes Ambulance Autopsy Performed: ☐ Yes ☐ No
 Pronounced By N/A Date/time N/A
 Cause of Death N/A
 Legal Identification Made By N/A
 Next of Kin Notified N/A Relation N/A
 Notified By N/A Date/time N/A
 Body Released To N/A
 Personal Property Removed By DPS Personnel: ☐ Yes ☒ No
 Ejected: ☐ Yes ☒ No ☐ N/A If yes, through

Page 1 of 1Case Number AST 38-05-059

THI-10

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNITDATE: LOG #:

Fatality

ALABAMA UNIFORM TRAFFIC ACCIDENT REPORT

AST-27
REV. 1/01

Shaded Areas To Be Used By Data Processing Only

Sheet 1 of 4 Sheet(s)

Microfilm No.

DPS

Accident No.

Local Case No.

| LOCATION AND TIME | | Date | | Time | | AM | | Day of Week | | County | | City | | Rural | | Highway Classification | | M - Municipal | | Local Zone | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------|--|--|--|----------|--|----|--|-------------|--|--------|--|--|--|-------|--|--------------------------|--|-------------------|--|------------|--|---|--|--|--|--|--|--|--|--|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|------------------------------|--|--|--|--|--|--|--|--|--|------|--|--|--|--|--|--|--|--|--|
| | | 03/07/2005 | | 7:16 | | PM | | T W TH | | 55 | | | | X | | 1 - Interstate S - State | | P - Private Prop. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Month Day Year | | Hour Min | | MT | | F S S | | | | | | | | D - Federal C - County | | O - Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LOCATION AND TIME | | On Street Road or Highway | | | | | | | | | | At Intersection of or Between (Node 1) | | | | | | | | | | And (Node 2) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | U.S. 231 | | | | | | | | | | County Road 5532 | | | | | | | | | | County Road 330 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | S053 | | | | | | | | | | 7248 | | | | | | | | | | 7247 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 1 Node 1 2 Node 2 | | | | | | | | | | 1 Node 1 2 Node 2 | | | | | | | | | | 1 Node 1 2 Node 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LEFT SCENE | | First Harmful Event | | | | | | | | | | Event Location | | | | | | | | | | Distance to Fixed Object | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 20 | | | | | | | | | | 1 | | | | | | | | | | N/A FT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| COM VEH | | Driver Full Name | | | | | | | | | | Street Address | | | | | | | | | | City and State | | | | | | | | | | Zip | | | | | | | | | | Telephone No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Michael Duke | | | | | | | | | | 467 Longview Road | | | | | | | | | | Pontotoc, Ms. | | | | | | | | | | 38863 | | | | | | | | | | 662 509-8281 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | D 01 12 1968 | | | | | | | | | | Race Sex DL State Driver License No. | | | | | | | | | | DL Class DL Status | | | | | | | | | | List Restrictions Not Completed With | | | | | | | | | | CDL Status | | | | | | | | | | List Endorsements Not Completed With | | | | | | | | | | Residence Less Than 25 Miles | | | | | | | | | | | | | | | | | | | |
| | | B 01 12 1968 | | | | | | | | | | W M Ms | | | | | | | | | | 800063742 | | | | | | | | | | A C | | | | | | | | | | C | | | | | | | | | | Yes (No) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| UNIT 1 | | Place of Employment | | | | | | | | | | Utility Insurance Co. | | | | | | | | | | Social Security No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Lane Heard Trucking New Albany, Mississippi | | | | | | | | | | Great Casualty | | | | | | | | | | 4 2101-431-98518 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Driver 1 - No Defect 2 - Apparently Asleep 3 - Fatigued 4 - Ill 5 - Other | | | | | | | | | | Officer's Opinion: 1 - Blood Test 2 - Urine Test 3 - Urine Test 4 - Unable to Administer 5 - Refused Test | | | | | | | | | | Test Results | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | N/A | | | | | | | | | | N/A | | | | | | | | | | N/A | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE | | Vehicle Year | | | | | | | | | | Make | | | | | | | | | | Model | | | | | | | | | | Body | | | | | | | | | | V.I.N. | | | | | | | | | | License Tag Number | | | | | | | | | | State | | | | | | | | | | Year | | | | | | | | | |
| | | 2001 | | | | | | | | | | Fhrt | | | | | | | | | | Tra | | | | | | | | | | NA | | | | | | | | | | IFUPCSZB01LG233001 | | | | | | | | | | N/A | | | | | | | | | | N/A | | | | | | | | | | | | | | | | | | | |
| | | Owner's Name | | | | | | | | | | Street or R.F.D. | | | | | | | | | | City | | | | | | | | | | State | | | | | | | | | | Zip | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Lane Heard Trucking | | | | | | | | | | 1010 Hickory Ridge Drive | | | | | | | | | | New Albany | | | | | | | | | | Ms | | | | | | | | | | 38652 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE OR PEDESTRIAN | | Type | | | | | | | | | | Usage | | | | | | | | | | Hazardous Cargo | | | | | | | | | | Attachment | | | | | | | | | | Contributing Defect | | | | | | | | | | Circle areas Damaged On Diagram | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 1 - Auto 11 - Moped 2 - Sta. Wagon 12 - M. Scooter 3 - Pick Up 13 - Pedal Cycle 4 - Van 14 - Farm Mach. 5 - Truck Tractor 15 - Train 6 - Other Truck 16 - Road Equip. 7 - Comm Bus 17 - Ridden Animal 8 - School Bus 18 - M. Home (R.V.) 9 - Other Bus 19 - ATV 10 - Motorcycle 20 - Other | | | | | | | | | | 1 - Personal 2 - Driver Trng. 3 - Construction 4 - Ambulance/Paramedical 5 - Military 6 - Taxi 7 - Transport Prop 8 - Agriculture 9 - Wrecker/Tow 10 - Police 11 - Other Business 12 - Bus/Pass. Transport. 13 - Fire Fighting 14 - Other 15 - Fire Fighting 16 - Other 17 - Transport Prop 18 - Agriculture 19 - Wrecker/Tow 20 - Other | | | | | | | | | | 1 - None 2 - Explosive 3 - Gas 4 - Flammable Combust. Liq. 5 - Flammable Solids 6 - Oxidizer/Peroxide 7 - Poison 8 - Radioactive Material 9 - Corrosive Material 10 - Other | | | | | | | | | | 1 - None 2 - Mobile Home 3 - Semi Trailer 4 - Utility Trailer 5 - Wheel Trailer 6 - Boat Trailer 7 - Camper Trailer 8 - Towed Vehicle 9 - Tanker 10 - Pole Trailer 11 - Double Trailer 12 - Other | | | | | | | | | | 1 - None 2 - Brakes 3 - Steering 4 - Suspension 5 - Tires 6 - Exhaust 7 - Lights 8 - Turn Signal 9 - Windows/ Windshield 10 - Restraint Sys. 11 - Wheels 12 - Truck Coupling 13 - Cargo 14 - Fuel System 15 - Other 16 - Unknown | | | | | | | | | | 1 - Under Carriage 2 - NA 3 - NA 4 - NA 5 - NA 6 - NA 7 - NA 8 - NA 9 - NA 10 - NA 11 - NA 12 - NA 13 - NA 14 - NA 15 - NA 16 - NA 17 - NA 18 - NA 19 - NA 20 - NA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Speed Limit 55 MPH Est. Speed 55 MPH | | | | | | | | | | Class. Offense Charged | | | | | | | | | | Damage Severity | | | | | | | | | | Vehicle Towed Away? | | | | | | | | | | Occupants in Unit | | | | | | | | | | Enter Point of Initial Impact | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | None | | | | | | | | | | 1 - Non Visible 2 - Not Disabled | | | | | | | | | | Yes No | | | | | | | | | | 1 | | | | | | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| UNIT 2 | | Driver Full Name | | | | | | | | | | Street Address | | | | | | | | | | City and State | | | | | | | | | | Zip | | | | | | | | | | Telephone No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Gerald Ruhnow | | | | | | | | | | 9655 N 1400 Avenue | | | | | | | | | | Osco, IL | | | | | | | | | | 61274 | | | | | | | | | | Unk now-n | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | D 01 11 1950 | | | | | | | | | | Race Sex DL State Driver License No. | | | | | | | | | | DL Class DL Status | | | | | | | | | | List Restrictions Not Completed With | | | | | | | | | | CDL Status | | | | | | | | | | List Endorsements Not Completed With | | | | | | | | | | Residence Less Than 25 Miles | | | | | | | | | | | | | | | | | | | |
| | | B 01 11 1950 | | | | | | | | | | W M II | | | | | | | | | | R500-2925-0321 | | | | | | | | | | AM C | | | | | | | | | | C | | | | | | | | | | Yes (No) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| COM VEH | | Place of Employment | | | | | | | | | | Utility Insurance Co. | | | | | | | | | | Social Security No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Gerald Ruhnow Trucking Osco, Illinois | | | | | | | | | | Unknown | | | | | | | | | | U1n1k1-j1n1o1-w1n1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Driver 1 - No Defect 2 - Apparently Asleep 3 - Fatigued 4 - Ill 5 - Other | | | | | | | | | | Officer's Opinion: 1 - Blood Test 2 - Urine Test 3 - Urine Test 4 - Unable to Administer 5 - Refused Test | | | | | | | | | | Test Results | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | N/A | | | | | | | | | | N/A | | | | | | | | | | N/A | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE | | Vehicle Year | | | | | | | | | | Make | | | | | | | | | | Model | | | | | | | | | | Body | | | | | | | | | | V.I.N. | | | | | | | | | | License Tag Number | | | | | | | | | | State | | | | | | | | | | Year | | | | | | | | | |
| | | 2003 | | | | | | | | | | Ptb | | | | | | | | | | Tra | | | | | | | | | | NA | | | | | | | | | | IXP5DB 9X23D590431 | | | | | | | | | | P429865 | | | | | | | | | | IL | | | | | | | | | | 2006 | | | | | | | | | |
| | | Owner's Name | | | | | | | | | | Street or R.F.D. | | | | | | | | | | City | | | | | | | | | | State | | | | | | | | | | Zip | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Same as above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE OR PEDESTRIAN | | Type | | | | | | | | | | Usage | | | | | | | | | | Hazardous Cargo | | | | | | | | | | Attachment | | | | | | | | | | Contributing Defect | | | | | | | | | | Circle areas Damaged On Diagram | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 1 - Auto 11 - Moped 2 - Sta. Wagon 12 - M. Scooter 3 - Pick Up 13 - Pedal Cycle 4 - Van 14 - Farm Mach. 5 - Truck Tractor 15 - Train 6 - Other Truck 16 - Road Equip. 7 - Comm Bus 17 - Ridden Animal 8 - School Bus 18 - M. Home (R.V.) 9 - Other Bus 19 - ATV 10 - Motorcycle 20 - Other | | | | | | | | | | 1 - Personal 2 - Driver Trng. 3 - Construction 4 - Ambulance/Paramedical 5 - Military 6 - Taxi 7 - Transport Prop 8 - Agriculture 9 - Wrecker/Tow 10 - Police 11 - Other Business 12 - Bus/Pass. Transport. 13 - Fire Fighting 14 - Other 15 - Fire Fighting 16 - Other 17 - Transport Prop 18 - Agriculture 19 - Wrecker/Tow 20 - Other | | | | | | | | | | 1 - None 2 - Explosive 3 - Gas 4 - Flammable Combust. Liq. 5 - Flammable Solids 6 - Oxidizer/Peroxide 7 - Poison 8 - Radioactive Material 9 - Corrosive Material 10 - Other | | | | | | | | | | 1 - None 2 - Mobile Home 3 - Semi Trailer 4 - Utility Trailer 5 - Wheel Trailer 6 - Boat Trailer 7 - Camper Trailer 8 - Towed Vehicle 9 - Tanker 10 - Pole Trailer 11 - Double Trailer 12 - Other | | | | | | | | | | 1 - None 2 - Brakes 3 - Steering 4 - Suspension 5 - Tires 6 - Exhaust 7 - Lights 8 - Turn Signal 9 - Windows/ Windshield 10 - Restraint Sys. 11 - Wheels 12 - Truck Coupling 13 - Cargo 14 - Fuel System 15 - Other 16 - Unknown | | | | | | | | | | 1 - Under Carriage 2 - NA 3 - NA 4 - NA 5 - NA 6 - NA 7 - NA 8 - NA 9 - NA 10 - NA 11 - NA 12 - NA 13 - NA 14 - NA 15 - NA 16 - NA 17 - NA 18 - NA 19 - NA 20 - NA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Speed Limit 55 MPH Est. Speed 55 MPH | | | | | | | | | | Class. Offense Charged | | | | | | | | | | Damage Severity | | | | | | | | | | Vehicle Towed Away? | | | | | | | | | | Occupants in Unit | | | | | | | | | | Enter Point of Initial Impact | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | None | | | | | | | | | | 1 - Non Visible 2 - Not Disabled | | | | | | | | | | Yes No | | | | | | | | | | 1 | | | | | | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE OR PEDESTRIAN | | Driver Full Name | | | | | | | | | | Street Address | | | | | | | | | | City and State | | | | | | | | | | Zip | | | | | | | | | | Telephone No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Gerald Ruhnow | | | | | | | | | | 9655 N 1400 Avenue | | | | | | | | | | Osco, IL | | | | | | | | | | 61274 | | | | | | | | | | Unk now-n | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | D 01 11 1950 | | | | | | | | | | Race Sex DL State Driver License No. | | | | | | | | | | DL Class DL Status | | | | | | | | | | List Restrictions Not Completed With | | | | | | | | | | CDL Status | | | | | | | | | | List Endorsements Not Completed With | | | | | | | | | | Residence Less Than 25 Miles | | | | | | | | | | | | | | | | | | | |
| | | B 01 11 1950 | | | | | | | | | | W M II | | | | | | | | | | R500-2925-0321 | | | | | | | | | | AM C | | | | | | | | | | C | | | | | | | | | | Yes (No) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| COM VEH | | Place of Employment | | | | | | | | | | Utility Insurance Co. | | | | | | | | | | Social Security No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Gerald Ruhnow Trucking Osco, Illinois | | | | | | | | | | Unknown | | | | | | | | | | U1n1k1-j1n1o1-w1n1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Driver 1 - No Defect 2 - Apparently Asleep 3 - Fatigued 4 - Ill 5 - Other | | | | | | | | | | Officer's Opinion: 1 - Blood Test 2 - Urine Test 3 - Urine Test 4 - Unable to Administer 5 - Refused Test | | | | | | | | | | Test Results | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | N/A | | | | | | | | | | N/A | | | | | | | | | | N/A | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE | | Vehicle Year | | | | | | | | | | Make | | | | | | | | | | Model | | | | | | | | | | Body | | | | | | | | | | V.I.N. | | | | | | | | | | License Tag Number | | | | | | | | | | State | | | | | | | | | | Year | | | | | | | | | |
| | | 2003 | | | | | | | | | | Ptb | | | | | | | | | | Tra | | | | | | | | | | NA | | | | | | | | | | IXP5DB 9X23D590431 | | | | | | | | | | P429865 | | | | | | | | | | IL | | | | | | | | | | 2006 | | | | | | | | | |
| | | Owner's Name | | | | | | | | | | Street or R.F.D. | | | | | | | | | | City | | | | | | | | | | State | | | | | | | | | | Zip | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Same as above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE OR PEDESTRIAN | | Type | | | | | | | | | | Usage | | | | | | | | | | Hazardous Cargo | | | | | | | | | | Attachment | | | | | | | | | | Contributing Defect | | | | | | | | | | Circle areas Damaged On Diagram | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 1 - Auto 11 - Moped 2 - Sta. Wagon 12 - M. Scooter 3 - Pick Up 13 - Pedal Cycle 4 - Van 14 - Farm Mach. 5 - Truck Tractor 15 - Train 6 - Other Truck 16 - Road Equip. 7 - Comm Bus 17 - Ridden Animal 8 - School Bus 18 - M. Home (R.V.) 9 - Other Bus 19 - ATV 10 - Motorcycle 20 - Other | | | | | | | | | | 1 - Personal 2 - Driver Trng. 3 - Construction 4 - Ambulance/Paramedical 5 - Military 6 - Taxi 7 - Transport Prop 8 - Agriculture 9 - Wrecker/Tow 10 - Police 11 - Other Business 12 - Bus/Pass. Transport. 13 - Fire Fighting 14 - Other 15 - Fire Fighting 16 - Other 17 - Transport Prop 18 - Agriculture 19 - Wrecker/Tow 20 - Other | | | | | | | | | | 1 - None 2 - Explosive 3 - Gas 4 - Flammable Combust. Liq. 5 - Flammable Solids 6 - Oxidizer/Peroxide 7 - Poison 8 - Radioactive Material 9 - Corrosive Material 10 - Other | | | | | | | | | | 1 - None 2 - Mobile Home 3 - Semi Trailer 4 - Utility Trailer 5 - Wheel Trailer 6 - Boat Trailer 7 - Camper Trailer 8 - Towed Vehicle 9 - Tanker 10 - Pole Trailer 11 - Double Trailer 12 - Other | | | | | | | | | | 1 - None 2 - Brakes 3 - Steering 4 - Suspension 5 - Tires 6 - Exhaust 7 - Lights 8 - Turn Signal 9 - Windows/ Windshield 10 - Restraint Sys. 11 - Wheels 12 - Truck Coupling 13 - Cargo 14 - Fuel System 15 - Other 16 - Unknown | | | | | | | | | | 1 - Under Carriage 2 - NA 3 - NA 4 - NA 5 - NA 6 - NA 7 - NA 8 - NA 9 - NA 10 - NA 11 - NA 12 - NA 13 - NA 14 - NA 15 - NA 16 - NA 17 - NA 18 - NA 19 - NA 20 - NA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Speed Limit 55 MPH Est. Speed 55 MPH | | | | | | | | | | Class. Offense Charged | | | | | | | | | | Damage Severity | | | | | | | | | | Vehicle Towed Away? | | | | | | | | | | Occupants in Unit | | | | | | | | | | Enter Point of Initial Impact | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | None | | | | | | | | | | 1 - Non Visible 2 - Not Disabled | | | | | | | | | | Yes No | | | | | | | | | | 1 | | | | | | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE OR PEDESTRIAN | | Driver Full Name | | | | | | | | | | Street Address | | | | | | | | | | City and State | | | | | | | | | | Zip | | | | | | | | | | Telephone No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Gerald Ruhnow | | | | | | | | | | 9655 N 1400 Avenue | | | | | | | | | | Osco, IL | | | | | | | | | | 61274 | | | | | | | | | | Unk now-n | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | D 01 11 1950 | | | | | | | | | | Race Sex DL State Driver License No. | | | | | | | | | | DL Class DL Status | | | | | | | | | | List Restrictions Not Completed With | | | | | | | | | | CDL Status | | | | | | | | | | List Endorsements Not Completed With | | | | | | | | | | Residence Less Than 25 Miles | | | | | | | | | | | | | | | | | | | |
| | | B 01 11 1950 | | | | | | | | | | W M II | | | | | | | | | | R500-2925-0321 | | | | | | | | | | AM C | | | | | | | | | | C | | | | | | | | | | Yes (No) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| COM VEH | | Place of Employment | | | | | | | | | | Utility Insurance Co. | | | | | | | | | | Social Security No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Gerald Ruhnow Trucking Osco, Illinois | | | | | | | | | | Unknown | | | | | | | | | | U1n1k1-j1n1o1-w1n1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Driver 1 - No Defect 2 - Apparently Asleep 3 - Fatigued 4 - Ill 5 - Other | | | | | | | | | | Officer's Opinion: 1 - Blood Test 2 - Urine Test 3 - Urine Test 4 - Unable to Administer 5 - Refused Test | | | | | | | | | | Test Results | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | N/A | | | | | | | | | | N/A | | | | | | | | | | N/A | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE | | Vehicle Year | | | | | | | | | | Make | | | | | | | | | | Model | | | | | | | | | | Body | | | | | | | | | | V.I.N. | | | | | | | | | | License Tag Number | | | | | | | | | | State | | | | | | | | | | Year | | | | | | | | | |
| | | 2003 | | | | | | | | | | Ptb | | | | | | | | | | Tra | | | | | | | | | | NA | | | | | | | | | | IXP5DB 9X23D590431 | | | | | | | | | | P429865 | | | | | | | | | | IL | | | | | | | | | | 2006 | | | | | | | | | |
| | | Owner's Name | | | | | | | | | | Street or R.F.D. | | | | | | | | | | City | | | | | | | | | | State | | | | | | | | | | Zip | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Same as above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE OR PEDESTRIAN | | Type | | | | | | | | | | Usage | | | | | | | | | | Hazardous Cargo | | | | | | | | | | Attachment | | | | | | | | | | Contributing Defect | | | | | | | | | | Circle areas Damaged On Diagram | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 1 - Auto 11 - Moped 2 - Sta. Wagon 12 - M. Scooter 3 - Pick Up 13 - Pedal Cycle 4 - Van 14 - Farm Mach. 5 - Truck Tractor 15 - Train 6 - Other Truck 16 - Road Equip. 7 - Comm Bus 17 - Ridden Animal 8 - School Bus 18 - M. Home (R.V.) 9 - Other Bus 19 - ATV 10 - Motorcycle 20 - Other | | | | | | | | | | 1 - Personal 2 - Driver Trng. 3 - Construction 4 - Ambulance/Paramedical 5 - Military 6 - Taxi 7 - Transport Prop 8 - Agriculture 9 - Wrecker/Tow 10 - Police 11 - Other Business 12 - Bus/Pass. Transport. 13 - Fire Fighting 14 - Other 15 - Fire Fighting 16 - Other 17 - Transport Prop 18 - Agriculture 19 - Wrecker/Tow 20 - Other | | | | | | | | | | 1 - None 2 - Explosive 3 - Gas 4 - Flammable Combust. Liq. 5 - Flammable Solids 6 - Oxidizer/Peroxide 7 - Poison 8 - Radioactive Material 9 - Corrosive Material 10 - Other | | | | | | | | | | 1 - None 2 - Mobile Home 3 - Semi Trailer 4 - Utility Trailer 5 - Wheel Trailer 6 - Boat Trailer 7 - Camper Trailer 8 - Towed Vehicle 9 - Tanker 10 - Pole Trailer 11 - Double Trailer 12 - Other | | | | | | | | | | 1 - None 2 - Brakes 3 - Steering 4 - Suspension 5 - Tires 6 - Exhaust 7 - Lights 8 - Turn Signal 9 - Windows/ Windshield 10 - Restraint Sys. 11 - Wheels 12 - Truck Coupling 13 - Cargo 14 - Fuel System 15 - Other 16 - Unknown | | | | | | | | | | 1 - Under Carriage 2 - NA 3 - NA 4 - NA 5 - NA 6 - NA 7 - NA 8 - NA 9 - NA 10 - NA 11 - NA 12 - NA 13 - NA 14 - NA 15 - NA 16 - NA 17 - NA 18 - NA 19 - NA 20 - NA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Speed Limit 55 MPH Est. Speed 55 MPH | | | | | | | | | | Class. Offense Charged | | | | | | | | | | Damage Severity | | | | | | | | | | Vehicle Towed Away? | | | | | | | | | | Occupants in Unit | | | | | | | | | | Enter Point of Initial Impact | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | None | | | | | | | | | | 1 - Non Visible 2 - Not Disabled | | | | | | | | | | Yes No | | | | | | | | | | 1 | | | | | | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE OR PEDESTRIAN | | Driver Full Name | | | | | | | | | | Street Address | | | | | | | | | | City and State | | | | | | | | | | Zip | | | | | | | | | | Telephone No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Gerald Ruhnow | | | | | | | | | | 9655 N 1400 Avenue | | | | | | | | | | Osco, IL | | | | | | | | | | 61274 | | | | | | | | | | Unk now-n | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | D 01 11 1950 | | | | | | | | | | Race Sex DL State Driver License No. | | | | | | | | | | DL Class DL Status | | | | | | | | | | List Restrictions Not Completed With | | | | | | | | | | CDL Status | | | | | | | | | | List Endorsements Not Completed With | | | | | | | | | | Residence Less Than 25 Miles | | | | | | | | | | | | | | | | | | | |
| | | B 01 11 1950 | | | | | | | | | | W M II | | | | | | | | | | R500-2925-0321 | | | | | | | | | | AM C | | | | | | | | | | C | | | | | | | | | | Yes (No) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| COM VEH | | Place of Employment | | | | | | | | | | Utility Insurance Co. | | | | | | | | | | Social Security No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Gerald Ruhnow Trucking Osco, Illinois | | | | | | | | | | Unknown | | | | | | | | | | U1n1k1-j1n1o1-w1n1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Driver 1 - No Defect 2 - Apparently Asleep 3 - Fatigued 4 - Ill 5 - Other | | | | | | | | | | Officer's Opinion: 1 - Blood Test 2 - Urine Test 3 - Urine Test 4 - Unable to Administer 5 - Refused Test | | | | | | | | | | Test Results | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | N/A | | | | | | | | | | N/A | | | | | | | | | | N/A | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE | | Vehicle Year | | | | | | | | | | Make | | | | | | | | | | Model | | | | | | | | | | Body | | | | | | | | | | V.I.N. | | | | | | | | | | License Tag Number | | | | | | | | | | State | | | | | | | | | | Year | | | | | | | | | |
| | | 2003 | | | | | | | | | | Ptb | | | | | | | | | | Tra | | | | | | | | | | NA | | | | | | | | | | IXP5DB 9X23D590431 | | | | | | | | | | P429865 | | | | | | | | | | IL | | | | | | | | | | 2006 | | | | | | | | | |
| | | Owner's Name | | | | | | | | | | Street or R.F.D. | | | | | | | | | | City | | | | | | | | | | State | | | | | | | | | | Zip | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Same as above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE OR PEDESTRIAN | | Type | | | | | | | | | | Usage | | | | | | | | | | Hazardous Cargo | | | | | | | | | | Attachment | | | | | | | | | | Contributing Defect | | | | | | | | | | Circle areas Damaged On Diagram | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 1 - Auto 11 - Moped 2 - Sta. Wagon 12 - M. Scooter 3 - Pick Up 13 - Pedal Cycle 4 - Van 14 - Farm Mach. 5 - Truck Tractor 15 - Train 6 - Other Truck 16 - Road Equip. 7 - Comm Bus 17 - Ridden Animal 8 - School Bus 18 - M. Home (R.V.) 9 - Other Bus 19 - ATV 10 - Motorcycle 20 - Other | | | | | | | | | | 1 - Personal 2 - Driver Trng. 3 - Construction 4 - Ambulance/Paramedical 5 - Military 6 - Taxi 7 - Transport Prop 8 - Agriculture 9 - Wrecker/Tow 10 - Police 11 - Other Business 12 - Bus/Pass. Transport. 13 - Fire Fighting 14 - Other 15 - Fire Fighting 16 - Other 17 - Transport Prop 18 - Agriculture 19 - Wrecker/Tow 20 - Other | | | | | | | | | | 1 - None 2 - Explosive 3 - Gas 4 - Flammable Combust. Liq. 5 - Flammable Solids 6 - Oxidizer/Peroxide 7 - Poison 8 - Radioactive Material 9 - Corrosive Material 10 - Other | | | | | | | | | | 1 - None 2 - Mobile Home 3 - Semi Trailer 4 - Utility Trailer 5 - Wheel Trailer 6 - Boat Trailer 7 - Camper Trailer 8 - Towed Vehicle 9 - Tanker 10 - Pole Trailer 11 - Double Trailer 12 - Other | | | | | | | | | | 1 - None 2 - Brakes 3 - Steering 4 - Suspension 5 - Tires 6 - Exhaust 7 - Lights 8 - Turn Signal 9 - Windows/ Windshield 10 - Restraint Sys. 11 - Wheels 12 - Truck Coupling 13 - Cargo 14 - Fuel System 15 - Other 16 - Unknown | | | | | | | | | | 1 - Under Carriage 2 - NA 3 - NA 4 - NA 5 - NA 6 - NA 7 - NA 8 - NA 9 - NA 10 - NA 11 - NA 12 - NA 13 - NA 14 - NA 15 - NA 16 - NA 17 - NA 18 - NA 19 - NA 20 - NA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Speed Limit 55 MPH Est. Speed 55 MPH | | | | | | | | | | Class. Offense Charged | | | | | | | | | | Damage Severity | | | | | | | | | | Vehicle Towed Away? | | | | | | | | | | Occupants in Unit | | | | | | | | | | Enter Point of Initial Impact | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | None | | | | | | | | | | 1 - Non Visible 2 - Not Disabled | | | | | | | | | | Yes No | | | | | | | | | | 1 | | | | | | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE OR PEDESTRIAN | | Driver Full Name | | | | | | | | | | Street Address | | | | | | | | | | City and State | | | | | | | | | | Zip | | | | | | | | | | Telephone No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Gerald Ruhnow | | | | | | | | | | 9655 N 1400 Avenue | | | | | | | | | | Osco, IL | | | | | | | | | | 61274 | | | | | | | | | | Unk now-n | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | D 01 11 1950 | | | | | | | | | | Race Sex DL State Driver License No. | | | | | | | | | | DL Class DL Status | | | | | | | | | | List Restrictions Not Completed With | | | | | | | | | | CDL Status | | | | | | | | | | List Endorsements Not Completed With | | | | | | | | | | Residence Less Than 25 Miles | | | | | | | | | | | | | | | | | | | |
| | | B 01 11 1950 | | | | | | | | | | W M II | | | | | | | | | | R500-2925-0321 | | | | | | | | | | AM C | | | | | | | | | | C | | | | | | | | | | Yes (No) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| COM VEH | | Place of Employment | | | | | | | | | | Utility Insurance Co. | | | | | | | | | | Social Security No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Gerald Ruhnow Trucking Osco, Illinois | | | | | | | | | | Unknown | | | | | | | | | | U1n1k1-j1n1o1-w1n1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | N/A | | | | | | | | | | N/A | | | | | | | | | | N/A | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE | | Vehicle Year | | | | | | | | | | Make | | | | | | | | | | Model | | | | | | | | | | Body | | | | | | | | | | V.I.N. | | | | | | | | | | License Tag Number | | | | | | | | | | State | | | | | | | | | | Year | | | | | | | | | |
| | | 2003 | | | | | | | | | | Ptb | | | | | | | | | | Tra | | | | | | | | | | NA | | | | | | | | | | IXP5DB 9X23D590431 | | | | | | | | | | P429865 | | | | | | | | | | IL | | | | | | | | | | 2006 | | | | | | | | | |
| | | Owner's Name | | | | | | | | | | Street or R.F.D. | | | | | | | | | | City | | | | | | | | | | State | | | | | | | | | | Zip | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Same as above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE OR PEDESTRIAN | | Type | | | | | | | | | | Usage | | | | | | | | | | Hazardous Cargo | | | | | | | | | | Attachment | | | | | | | | | | Contributing Defect | | | | | | | | | | Circle areas Damaged On Diagram | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 1 - Auto 11 - Moped 2 - Sta. Wagon 12 - M. Scooter 3 - Pick Up 13 - Pedal Cycle 4 - Van 14 - Farm Mach. 5 - Truck Tractor 15 - Train 6 - Other Truck 16 - Road Equip. 7 - Comm Bus 17 - Ridden Animal 8 - School Bus 18 - M. Home (R.V.) 9 - Other Bus 19 - ATV 10 - Motorcycle 20 - Other | | | | | | | | | | 1 - Personal 2 - Driver Trng. 3 - Construction 4 - Ambulance/Paramedical 5 - Military | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| SEATING | Other Involved Unit (Circle One) | | | | | | | | | | Other Involved Unit (Circle One) | | | | | | | | | | CODES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| NARRATIVE AND DIAGRAM | <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">Unit 1</div> <div style="width: 40%;"> <table border="1" style="width: 100%; text-align: center;"> <tr><td>1</td><td>2</td><td>3</td></tr> <tr><td>4</td><td>5</td><td>6</td></tr> <tr><td>7</td><td>8</td><td>9</td></tr> </table> </div> <div style="width: 20%;">Unit 2</div> </div> | | | | | | | | | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">Unit 1</div> <div style="width: 40%;"> <table border="1" style="width: 100%; text-align: center;"> <tr><td>1</td><td>2</td><td>3</td></tr> <tr><td>4</td><td>5</td><td>6</td></tr> <tr><td>7</td><td>8</td><td>9</td></tr> </table> </div> <div style="width: 20%;">Unit 2</div> </div> | | | | | | | | | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">Unit 1</div> <div style="width: 40%;"> <table border="1" style="width: 100%; text-align: center;"> <tr><td>1</td><td>2</td><td>3</td></tr> <tr><td>4</td><td>5</td><td>6</td></tr> <tr><td>7</td><td>8</td><td>9</td></tr> </table> </div> <div style="width: 20%;">Unit 2</div> </div> | | | | | | | | | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">Unit 1</div> <div style="width: 40%;"> <table border="1" style="width: 100%; text-align: center;"> <tr><td>1</td><td>2</td><td>3</td></tr> <tr><td>4</td><td>5</td><td>6</td></tr> <tr><td>7</td><td>8</td><td>9</td></tr> </table> </div> <div style="width: 20%;">Unit 2</div> </div> | | | | | | | | | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
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Officer's Opinion of What Happened: Unit#2 was traveling north on U.S. 231. Unit#1 was traveling south on U.S. 231. A motorcycle from a previous accident that had just occurred was lying in the southbound lane of U.S. 231. Unit#1 topped the hill and struck the motorcycle lying in the roadway. The motorcycle lodged underneath Unit#1 causing the fuel tanks to rupture and explode. Driver of Unit#1 lost control of vehicle and started to travel into the northbound lane. Unit#2 crested the hill traveling north and struck Unit#1 which had just crossed into his lane of travel. Another explosion occurred engulfing both Units in flames.

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| For Each Roadway Environment Field, Circle One Entry for Each Involved Unit: | | | | | | | | | |
| Unit 1 | | Unit 2 | | Unit 3 | | Unit 4 | | Unit 5 | |
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| 1 | | 2 | | 3 | | 4 | | 5 | |
| 1 | | 2 | | 3 | | 4 | | | |

ALABAMA
UNIFORM TRAFFIC ACCIDENT REPORT

LOCAL CASE NO. _____

SHEET 2 OF 4 SHEET(S)

AET No. 34 Rev. 4/86

SUPPLEMENTAL SHEET

ADDITIONAL ACCIDENT VICTIMS

| | Name | Address | Unit No. | Seat Pos. | Injury Type | Age | Sex | Ejection | First Aid By |
|----|----------|----------|----------|-----------|-------------|-----|-----|----------|--------------|
| 3 | | | | | | | | | |
| | Taken to | Taken by | | | | | | | |
| 4 | | | | | | | | | |
| | Taken to | Taken by | | | | | | | |
| 5 | | | | | | | | | |
| | Taken to | Taken by | | | | | | | |
| 6 | | | | | | | | | |
| | Taken to | Taken by | | | | | | | |
| 7 | | | | | | | | | |
| | Taken to | Taken by | | | | | | | |
| 8 | | | | | | | | | |
| | Taken to | Taken by | | | | | | | |
| 9 | | | | | | | | | |
| | Taken to | Taken by | | | | | | | |
| 10 | | | | | | | | | |
| | Taken to | Taken by | | | | | | | |
| 11 | | | | | | | | | |
| | Taken to | Taken by | | | | | | | |
| 12 | | | | | | | | | |
| | Taken to | Taken by | | | | | | | |

ADDITIONAL NARRATIVE SPACE

DESCRIBE WHAT HAPPENED (Refer to vehicles by number)

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT

DATE: _____

LOG #: _____

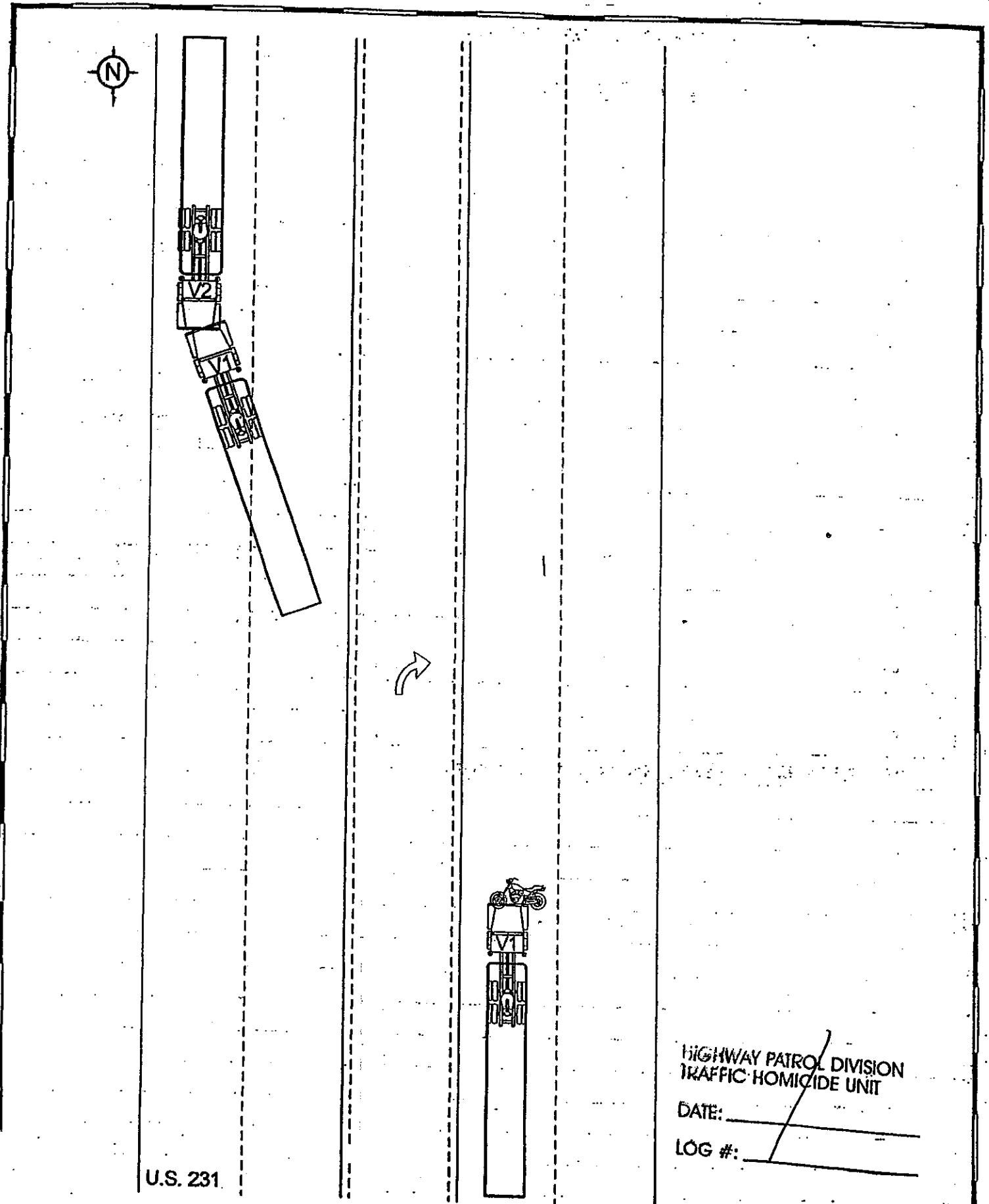


Diagram Not to Scale

Diagram Scale 1 inch

(10 feet)

(20 feet)

Location

Time

AM
P.M.

Alabama Uniform Traffic Accident Report Truck/Bus Supplemental Sheet

AST-34T
194Unit No. 1
(same as on main report)Sheet 3 of 4 Sheets

General Instructions

Complete this form for each qualifying vehicle ONLY if the accident meets BOTH of the following criteria:

1. The accident involved a qualifying vehicle (truck with 6 or more tires or Haz/Mat placard, or a bus designed to carry 16 or more, including driver) and;
2. The accident resulted in at least one of the following: A. one or more fatalities B. one or more persons injured and taken from the scene for immediate medical attention, or C. one or more involved vehicles had to be towed from the scene as a result of disabling damage or had to receive assistance to leave.

Screening Information

Number of Qualifying Vehicles:

Trucks with 6 or more tires or Haz/Mat placard 1
Buses designed to carry 16 or more (including driver) 0

Number of Persons:

Sustaining fatal injuries 1
Transported for immediate medical treatment 2

Number of vehicles towed from scene due to damage or provided assistance 2

Vehicle Information

Gross Vehicle Weight Rating (GVWR)

A. Truck, tractor or bus 16,500
B. Trailer or trailers (total) 65,000
Total GVWR for unit (A+B) 81500

Hazardous Material Involvement

Did vehicle have a Haz/Mat placard Yes ☒ No

If Yes, include following information from placard

A. Name or 4-digit number from diamond or box N/A

B. The 1 -digit number from bottom of diamond N/A

Was hazardous material released from THIS vehicle's cargo? Yes ☒ No

Total number of axles 5

Vehicle Configuration (circle one number)

1. Bus 2. Single unit truck (2 axles/ 6 or more tires) 3. Single unit truck (3 or more axles)
4. Truck with trailer 5. Truck tractor only (bobtail) 6. Tractor with semi-trailer 7. Tractor with double trailers
8. Tractor with triple trailers 9. Unknown class heavy truck 0. Any other 4-fired vehicle

Cargo Body Type (circle one number)

1. Bus 2. Van/enclosed box 3. Cargo tank 4. Flatbed 5. Dump
6. Concrete mixer 7. Auto transporter 8. Garbage/ refuse 9. Other _____

Motor Carrier Information

NOTE: If NOT a motor carrier, enter NONE under Carrier Name, 0 for None under Carrier Identification Numbers, and go to Sequence Of Events Section

Carrier Name Lane Heard Trucking

Source (circle one number) 1. Vehicle side 2. Shipping papers 3. Driver 4. Other

Carrier mailing address (Street or P.O. Box) 1010 Hickory Ridge Drive

City, State, Zip New Albany, Mississippi 38863

Carrier Identification Numbers (8 None = 0)

US DOT 00568612 ICC MC _____ STATE NO. _____

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT
DATE: _____
LOG #: _____
STATE: _____

Sequence of Events

Note: for THIS vehicle - list up to four Event #1 10 Event #2 6 Event #3 _____ Event #4 _____

EVENT CODES

- | | | | | |
|----------------|------------------------|------------------------|--------------------------|------------------------|
| Non-Collision | 1. Ran off road | 2. Jackknife | 3. Overturned (rollover) | 4. Downhill runaway |
| | 5. Cargo loss or shift | 6. Explosion or fire | 7. Separation of units | 8. Other non-collision |
| Collision With | 9. Pedestrian | 10. Non-parked vehicle | 11. Parked vehicle | 12. Train |
| | 13. Pedal cycle | 14. Animal | 15. Fixed object | 16. Other object |

Signature of Reporting Officer _____

Officer ID _____

Reporting Police Agency ORI _____

Date _____

Time _____

AP
FW

Alabama Uniform Traffic Accident Report

Truck/Bus Supplemental Sheet

AST-34T
194Unit No. 2
(same as on main report)Sheet 4 of 4 Sheets

General Instructions

Complete this form for each qualifying vehicle ONLY if the accident meets BOTH of the following criteria:

1. The accident involved a qualifying vehicle (truck with 6 or more tires or Haz/Mat placard, or a bus designed to carry 16 or more, including driver) and;
2. The accident resulted in at least one of the following: A. one or more fatalities B. one or more persons injured and taken from the scene for immediate medical attention, or C. one or more involved vehicles had to be towed from the scene as a result of disabling damage or had to receive assistance to leave.

Screening Information

Number of Qualifying Vehicles:

Trucks with 6 or more tires or Haz/Mat placard 1Buses designed to carry 16 or more (including driver) 0Number of vehicles towed from scene due to damage or provided assistance 2

Number of Persons:

Sustaining fatal injuries 1Transported for immediate medical treatment 2

Vehicle Information

Gross Vehicle Weight Rating (GVWR)

A. Truck, tractor or bus 15,000B. Trailer or trailers (total) 25,000Total GVWR for unit (A+B) 40000

Hazardous Material Involvement

Did vehicle have a Haz/Mat placard Yes ☒ No

If Yes, include following information from placard

A. Name or 4-digit number from diamond or box _____

B. The 1 -digit number from bottom of diamond _____

Was hazardous material released from THIS vehicle's cargo? Yes ☒ NoTotal number of axles 5

Vehicle Configuration (circle one number)

1. Bus
2. Single unit truck (2 axles/ 6 or more tires)
3. Single unit truck (3 or more axles)
4. Truck with trailer
5. Truck tractor only (bobtail)
6. Tractor with semi-trailer
7. Tractor with double trailers
8. Tractor with triple trailers
9. Unknown class heavy truck
0. Any other 4-wheeled vehicle

Cargo Body Type (circle one number)

1. Bus
2. Van/enclosed box
3. Cargo tank
4. Flatbed
5. Dump
6. Concrete mixer
7. Auto transporter
8. Garbage/refuse
9. Other _____

Motor Carrier Information

NOTE: If NOT a motor carrier, enter NONE under Carrier Name, 0 for None under Carrier Identification Numbers, and go to Sequence Of Events Section

Carrier Name Gerald Ruhnow Trucking

Source (circle one number) 1. Vehicle side 2. Shipping papers 3. Driver 4. Other

Carrier mailing address (Street or P.O. Box) 9655 N 1400 AvenueCity, State, Zip Osco, Illinois 61274Carrier Identification Numbers (8 None = 0)US DOT 00589814 ICC MC _____ STATE NO. _____

TRAFFIC PATROL DIVISION
TRAFFIC HOMICIDE UNIT
DATE: _____
LOG # _____

Sequence of Events

Note: for THIS vehicle - list up to four

Event #1 10 Event #2 6 Event #3 _____ Event #4 _____EVENT
CODES

Non-Collision

1. Ran off road

2. Jackknife

3. Overturned (rollover)

4. Downhill runaway

5. Cargo loss or shift

6. Explosion or fire

7. Separation of units

8. Other non-collision

Collision With

9. Pedestrian

10. Non-parked vehicle

11. Parked vehicle

12. Train

13. Pedal cycle

14. Animal

15. Fixed object

16. Other object

Signature of Reporting Officer _____

Officer ID _____

Reporting Police Agency ORI _____

Date _____

Time _____



STATE OF MISSISSIPPI
DEPARTMENT OF PUBLIC SAFETY

MOTOR VEHICLE REPORT

MICHAEL E DUKE
467 LONGVIEW ROAD
PONTOTOC MS 38863 9227

DATE: 03/28/2005
PAGE: 1

DRIVER LICENSE NO.: 800-06-3742

TYPE OF LICENSE: RENEWAL LICENSE
ISSUE DATE: 02/11/2004
DONOR: N HEIGHT: 6 03
EYES: GRN WEIGHT: 250
RACE: W SEX: M
LICENSE STATUS: VALID
COMM STATUS: VALID
REINSTATEMENT DATE:

BIRTH DATE: 01/12/1968 SEX: M
EXPIRATION: 01/12/2008
CLASS: CLASS A COMM. LICENSE
RESTRICTIONS: NONE
PREVIOUS STATE:
PREVIOUS LICENSE:

PRIOR STATUS:
ENDORSEMENTS: N

**** NO CITATIONS FOUND ****
**** END OF DRIVERS HISTORY WITH 0 RECORDS PRINTED ****

THIS REPORT MAY BE USED AS A CLEARANCE LETTER IF THE DRIVER'S LICENSE
STATUS IS 'VALID' OR 'CLEAR' OR IN THE CASE THE DRIVER HAS 'MOVED'
AND HIS PREVIOUS LICENSE STATUS IS 'VALID' OR 'CLEAR.'

DRIVER RECORDS BRANCH
PHONE 601/987-1274

STATE OF MISSISSIPPI
DEPARTMENT OF PUBLIC SAFETY

I, GEORGE WHITE, DIRECTOR OF DRIVER
RECORDS BRANCH, DO HEREBY
CERTIFY THAT THIS IS A TRUE COPY OF
DOCUMENTS OR RECORDS ON FILE WITH
THIS DEPARTMENT.

SIGNATURE: *George White*
DATE: *3/28/05*

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT, BY: *[Signature]*

DATE: _____

LOG #: _____

**ALABAMA DEPARTMENT OF PUBLIC SAFETY
HIGHWAY PATROL DIVISION**

STATEMENT

PERSONALLY appeared (NAME) GENE RICHARDSON, who states:

I reside at 226-B TIMBER RIDGE DR in THOMASVILLE
Address City

GA 229-226-3912 RETIRED
State Telephone: Work Home Employment

Date of Birth: 2-14-1936 Social Security Number 514-26-5208

I have 15 years of education, and I can read and write. This statement is given on 3-8-2005

at 10:21 am/pm in the presence of TRP. Kevin D Cook who has officially identified himself/herself as a member of the ALABAMA STATE TROOPERS.

I PASSED THE MOTORCYCLE IN THE ROAD (231). I WAS IN THE
RIGHT LANE ^{SOUTH BOUND} AND JUST MISSED HITTING THE MOTORCYCLE. IT
WAS VERY DARK AND I ONLY SAW THE MOTORCYCLE ABOUT
10 FEET BEFORE I GOT TO IT. I SAW THE 18 WHEELER
IN MY REAR VIEW MIRROR ABOUT 100 YARDS BEHIND ME
IN THE RIGHT LANE. THERE WAS NO WAY FOR HIM TO MISS
THE MOTORCYCLE. WHEN HE HIT IT, THE TRUCK DRUG THE
MOTORCYCLE UNDER IT GENERATING TREMENDOUS SPARKS.
THE MOTORCYCLE BURST INTO FLAMES UNDER THE TRUCK
AND WITHIN 1 SECOND THE TRUCK WAS ENVELOPED IN
FLAMES. THE TRUCK WAS HEADING LEFT AS SOON AS
HE HIT THE MOTORCYCLE AND ENDED UP ON THE OTHER
SIDE OF THE ROAD. (NORTH BOUND LANE)

ALABAMA PATROL DIVISION
TRAFFIC HOMICIDE UNIT

DATE: _____
LOG #: _____

Gene Richardson

Signature

Kevin D Cook #833

Page number 1 of 1 pages

| Job Desc | Crew | Inst Num | Temp | Pressure | Start Date | | |
|-------------|--|------------|------------|----------|------------|---------|----------|
| Note | Continue File PIKE US 2310.raw 1:35:55 PM 3/8/05 | | | | | | |
| Note | 1:36:58 PM 3/8/05 | | | | | | |
| Occupied Pt | BS Pt | BS Brg | BS Read | Inst Ht | | | |
| 1 | 99 | | 358°57'38" | 5.30 | | | |
| Shot Pt | Trgt Ht | Hz Ang | Vi Ang | Slp Dist | Desc | Par Off | Perp Off |
| 101 | 6.00 | 359°50'54" | 89°49'31" | 137.61 | EP | 0.000 | 0.000 |
| 102 | 6.00 | 357°56'24" | 89°40'33" | 137.59 | FL | 0.000 | 0.000 |
| 103 | 6.00 | 353°05'25" | 89°37'11" | 137.83 | DASHL | 0.000 | 0.000 |
| 104 | 6.00 | 347°23'26" | 89°32'10" | 131.92 | YELLOW | 0.000 | 0.000 |
| 105 | 6.00 | 347°04'54" | 89°31'30" | 132.19 | DASHL | 0.000 | 0.000 |
| 106 | 6.00 | 342°11'42" | 89°37'02" | 134.22 | DASHL | 0.000 | 0.000 |
| 107 | 6.00 | 341°47'37" | 89°38'40" | 134.40 | YELLOW | 0.000 | 0.000 |
| 108 | 6.00 | 339°50'29" | 89°50'48" | 153.10 | DASHL | 0.000 | 0.000 |
| 109 | 6.00 | 325°00'30" | 90°02'08" | 152.71 | FL | 0.000 | 0.000 |
| 110 | 6.00 | 330°32'11" | 90°11'35" | 156.63 | FL | 0.000 | 0.000 |
| 111 | 6.00 | 330°22'30" | 90°15'34" | 156.85 | EP | 0.000 | 0.000 |
| 112 | 6.00 | 310°25'23" | 90°33'19" | 107.08 | EP | 0.000 | 0.000 |
| 113 | 6.00 | 309°46'08" | 90°10'23" | 90.34 | FL | 0.000 | 0.000 |
| 114 | 6.00 | 318°55'59" | 89°21'34" | 70.46 | YELLOW | 0.000 | 0.000 |
| 115 | 6.00 | 326°56'01" | 89°01'43" | 60.95 | YELLOW | 0.000 | 0.000 |
| 116 | 6.00 | 347°23'52" | 88°57'54" | 48.21 | FL | 0.000 | 0.000 |
| 117 | 6.00 | 191°37'26" | 89°17'15" | 60.11 | LINE | 0.000 | 0.000 |
| 118 | 6.00 | 195°58'31" | 89°08'53" | 60.62 | FL | 0.000 | 0.000 |
| 119 | 6.00 | 205°57'30" | 89°14'39" | 64.33 | DASHL | 0.000 | 0.000 |
| 120 | 6.00 | 214°38'58" | 89°18'04" | 69.82 | YELLOW | 0.000 | 0.000 |
| 121 | 6.00 | 215°11'52" | 89°18'08" | 70.38 | DASHL | 0.000 | 0.000 |
| 122 | 6.00 | 222°34'41" | 89°33'24" | 77.41 | DASHL | 0.000 | 0.000 |
| 123 | 6.00 | 222°54'48" | 89°33'24" | 77.32 | YELLOW | 0.000 | 0.000 |
| 124 | 6.00 | 229°38'04" | 89°56'07" | 84.45 | DASHL | 0.000 | 0.000 |
| 125 | 6.00 | 235°29'14" | 90°17'59" | 82.02 | FL | 0.000 | 0.000 |
| 126 | 6.00 | 238°09'31" | 90°32'18" | 103.59 | FL | 0.000 | 0.000 |
| 127 | 6.00 | 238°12'16" | 90°37'13" | 104.02 | EP | 0.000 | 0.000 |
| 128 | 6.00 | 232°38'04" | 90°47'04" | 120.97 | EP | 0.000 | 0.000 |
| 129 | 6.00 | 232°05'17" | 90°40'23" | 120.43 | FL | 0.000 | 0.000 |
| 130 | 6.00 | 201°47'01" | 90°06'08" | 230.61 | EP | 0.000 | 0.000 |
| 131 | 6.00 | 197°29'10" | 90°04'59" | 298.74 | EP | 0.000 | 0.000 |
| 132 | 6.00 | 195°13'35" | 89°58'47" | 298.17 | DASHL | 0.000 | 0.000 |
| 133 | 6.00 | 193°11'37" | 89°53'13" | 288.27 | DASHL | 0.000 | 0.000 |
| 134 | 6.00 | 193°00'34" | 89°52'41" | 287.99 | DASHL | 0.000 | 0.000 |
| 135 | 6.00 | 190°50'52" | 89°47'45" | 283.78 | DASHL | 0.000 | 0.000 |
| 136 | 6.00 | 188°02'59" | 89°46'18" | 298.67 | DASHL | 0.000 | 0.000 |
| 137 | 6.00 | 185°51'49" | 89°23'31" | 296.65 | FL | 0.000 | 0.000 |
| 138 | 6.00 | 184°51'10" | 88°44'08" | 295.51 | EP | 0.000 | 0.000 |
| 139 | 6.00 | 187°05'34" | 89°39'29" | 188.09 | RRWHL | 0.000 | 0.000 |
| 140 | 6.00 | 189°28'53" | 89°38'17" | 184.27 | LR | 0.000 | 0.000 |
| 141 | 6.00 | 199°26'57" | 89°41'00" | 146.95 | RRWHL | 0.000 | 0.000 |

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT

DATE: _____
LOG #: _____

| Job Desc | Crew | Inst Num | Temp | Pressure | Start Date | | |
|----------|------|------------|-----------|----------|------------|-------|-------|
| 142 | 6.00 | 201°00'40" | 89°42'48" | 147.22 | RRWHL | 0.000 | 0.000 |
| 143 | 6.00 | 184°29'25" | 89°52'04" | 108.74 | RED | 0.000 | 0.000 |
| 144 | 6.00 | 176°21'32" | 93°18'40" | 111.93 | RED | 0.000 | 0.000 |
| 145 | 6.00 | 165°58'31" | 92°28'20" | 120.64 | RED | 0.000 | 0.000 |
| 146 | 6.00 | 166°33'50" | 92°23'09" | 147.07 | RED | 0.000 | 0.000 |
| 147 | 6.00 | 166°24'26" | 92°11'52" | 171.45 | RED | 0.000 | 0.000 |
| 148 | 6.00 | 173°15'27" | 92°07'37" | 163.21 | RED | 0.000 | 0.000 |
| 149 | 6.00 | 181°01'54" | 91°14'47" | 163.10 | RED | 0.000 | 0.000 |
| 150 | 6.00 | 184°28'41" | 89°46'25" | 163.48 | RED | 0.000 | 0.000 |
| 151 | 6.00 | 186°22'33" | 89°39'09" | 160.65 | RED | 0.000 | 0.000 |
| 152 | 6.00 | 184°47'14" | 89°48'18" | 114.26 | RED | 0.000 | 0.000 |
| 153 | 6.00 | 358°37'27" | 95°18'37" | 35.51 | RM | 0.000 | 0.000 |

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT

DATE: _____

LOG #: _____

| | | |
|---------|----------|---------|
| -55.271 | -136.454 | 100.037 |
| -10.479 | -108.238 | 99.551 |
| 5.072 | -111.627 | 92.835 |
| -27.082 | -117.443 | 94.096 |
| 31.545 | -143.517 | 93.178 |
| 37.236 | -167.224 | 92.725 |
| 16.208 | -162.291 | 93.243 |
| -5.893 | -162.956 | 95.752 |
| -15.719 | -162.725 | 99.851 |
| -20.733 | -159.306 | 100.274 |
| -11.599 | -113.664 | 99.689 |
| -0.208 | 35.352 | 96.014 |

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT

DATE: _____

LOG #: _____

AST-27
REV. 1/81

ALABAMA UNIFORM TRAFFIC ACCIDENT REPORT

DPS

Accident No.

Shaded Areas To Be Used By Data Processing Only

Sheet 1 of 1 Sheet(s)

Microfilm No.

Local Case No.

| LOCATION AND TIME | | Date | | Time | | Day of Week | | County | | City | | Highway Classification | | Local Zone | |
|-------------------------------|--|--|--|-----------------------------------|--|-----------------------------|--|--------------------------|--|----------------------|--|-------------------------------|--|-------------------------------------|--|
| 03/07/2005 | | 1915 | | AM | | T W TH | | 55 | | | | I-Interstate S-State | | M-Municipal P-Private Prop. Q-Other | |
| On Street, Road or Highway | | At Intersection of or Between (Node 1) | | And (Node 2) | | | | | | | | | | | |
| US HWY 231 | | CORD 5532 | | CORD 3310 | | | | | | | | | | | |
| SO53 | | 724B | | 7247 | | | | | | | | | | | |
| Intersection Related | | Mile Post | | Control Access | | 1 - Main Rd | | 3 - Interchange | | 5 - Exit Ramp | | Prime Contr | | Prime Contr | |
| 1 - Node 1 2 - Node 2 | | 1175.10 | | Loc | | 2 - Frontage Rd | | 4 - Entrance Ramp | | 6 - N/A | | 02 | | 1 | |
| First Harmful Event | | Event Location | | Distance to Fixed Object | | | | | | | | | | | |
| 20 | | 1 | | NA FL | | | | | | | | | | | |
| Driver Full Name | | Street Address | | City and State | | ZIP | | Telephone No. | | | | | | | |
| CHRISTY LEANN CHAMPION | | 171 CACTUS DR. BOX 101 | | TROY AL | | 36081 | | 566-7123 | | | | | | | |
| DOB | | Race | | Sex | | DL State | | Driver License No. | | DL Class | | DL Status | | List Restrictions | |
| 02/04/1976 | | W | | F | | AL | | 6638197 | | D | | C | | N | |
| Place of Employment | | Liability Insurance Co. | | Social Security No. | | | | | | | | | | | |
| CRYSTALS, TROY ALABAMA | | SAREWAY | | 423-98-7034 | | | | | | | | | | | |
| Driver Condition | | 1 - No Defect | | 3 - Fatigued | | 8 - Other | | Subriety | | Officer's Opinion | | Alcohol | | Yes | |
| 2 - Apparently Asleep | | 4 - N | | 9 - Unknown | | | | | | Yes | | No | | No | |
| Maneuver | | Travel Road Name | | Road Code | | Travel Direction | | Other Contr Circumstance | | Prime Harm Event | | Event Loc | | | |
| 08 | | US HWY 231 | | | | N E W A-Not on Rd U-Unknown | | 08 | | 20 | | | | | |
| Veh Year | | Make | | Model | | Body | | V.I.N. | | License Tag Number | | State | | Year | |
| 1993 | | PONT | | GRA | | 4D | | 1GANE5538RCT12537 | | 38 F252 H | | AL | | 2005 | |
| Owner's Name | | Street or R.F.D. | | City | | State | | ZIP | | | | | | | |
| SAME | | | | | | | | | | | | | | | |
| Type | | Usage | | Hazardous Cargo | | Attachment | | Contributing Defect | | Circle areas Damaged | | On Diagram | | | |
| 1 - Auto | | 1 - Personal | | 1 - None | | 1 - None | | 1 - None | | 1 - Under Carriage | | 1 - Under Carriage | | | |
| 2 - Station Wagon | | 2 - Driver Trng. | | 2 - Explosive | | 2 - Mobile Home | | 2 - Brakes | | 2 - Brakes | | 2 - Brakes | | | |
| 3 - Pick Up | | 3 - Construction | | 3 - Gas | | 3 - Semi Trailer | | 3 - Steering | | 3 - Steering | | 3 - Steering | | | |
| 4 - Van | | 4 - Ambulance/Paramedical | | 4 - Flamm/Combust Liq. | | 4 - Utility Trailer | | 4 - Power Plant | | 4 - Power Plant | | 4 - Power Plant | | | |
| 5 - Truck Tractor | | 5 - Military | | 5 - Oxidizer/Peroxide | | 5 - 4-Wheel Trailer | | 5 - Tires | | 5 - Tires | | 5 - Tires | | | |
| 6 - Other Truck | | 6 - Taxi | | 6 - Poison | | 6 - Boat Trailer | | 6 - Exhaust | | 6 - Exhaust | | 6 - Exhaust | | | |
| 7 - Comm. Bus | | 7 - Transport Prop. | | 7 - Radioactive Matl. | | 7 - Camper Trailer | | 7 - Lights | | 7 - Lights | | 7 - Lights | | | |
| 8 - School Bus | | 8 - Agriculture | | 8 - Corrosive Material | | 8 - Towed Vehicle | | 8 - Turn Signal | | 8 - Turn Signal | | 8 - Turn Signal | | | |
| 9 - Other Bus | | 9 - Wrecker/Tow | | 9 - Other | | 9 - Tanker | | 9 - Fuel System | | 9 - Fuel System | | 9 - Fuel System | | | |
| 10 - Motorcycle | | | | | | 10 - Pole Trailer | | 10 - Unknown | | 10 - Unknown | | 10 - Unknown | | | |
| Speed Limit | | Est. Speed | | Citation Offense Charged | | Damage | | Vehicle Towed Away? | | Occupants in Unit | | Enter Point of Initial Impact | | | |
| 55 MPH | | 35 MPH | | NONE | | 1 - None Visible | | Yes | | 1 | | 15 | | | |
| Vehicle Towed By Whom: | | To Where: | | | | 2 - Not Disabled | | No | | | | | | | |
| NA | | NA | | | | 3 - Disabled | | No | | | | | | | |
| Driver/Pedestrian Full Name | | Street Address | | City and State | | ZIP | | Telephone No. | | | | | | | |
| MICHAEL DAVID ADKINS | | 452 S MAIN ST, BRUNDIDGE AL | | 36010 | | 735-3993 | | | | | | | | | |
| DOB | | Race | | Sex | | DL State | | Driver License No. | | DL Class | | DL Status | | List Restrictions | |
| 07/25/1956 | | W | | M | | AL | | 7646563 | | DMV | | C | | C | |
| Place of Employment | | Liability Insurance Co. | | Social Security No. | | | | | | | | | | | |
| WILEY SANDERS, TROY AL | | PROGRESSIVE | | 253 90 6504 | | | | | | | | | | | |
| Driver/Ped Condition | | 1 - No Defect | | 3 - Fatigued | | 8 - Other | | Subriety | | Officer's Opinion | | Alcohol | | Yes | |
| 2 - Apparently Asleep | | 4 - N | | 9 - Unknown | | | | | | Yes | | No | | No | |
| Maneuver/Action | | Travel Road Name | | Road Code | | Travel Direction | | Other Contr Circumstance | | Prime Harm Event | | Event Loc | | | |
| 01 | | US HWY 231 | | | | N E W A-Not on Rd U-Unknown | | 97 | | 30 | | | | | |
| Veh Year | | Make | | Model | | Body | | V.I.N. | | License Tag Number | | State | | Year | |
| 2004 | | YAMA | | VST | | WA | | JYAVMOIE64A065113 | | MBA-398 | | AL | | 2005 | |
| Owner's Name | | Street or R.F.D. | | City | | State | | ZIP | | | | | | | |
| SAME | | | | | | | | | | | | | | | |
| Type | | Usage | | Hazardous Cargo | | Attachment | | Contributing Defect | | Circle areas Damaged | | On Diagram | | | |
| 1 - Auto | | 1 - Personal | | 1 - None | | 1 - None | | 1 - None | | 1 - Under Carriage | | 1 - Under Carriage | | | |
| 2 - Station Wagon | | 2 - Driver Trng. | | 2 - Explosive | | 2 - Mobile Home | | 2 - Brakes | | 2 - Brakes | | 2 - Brakes | | | |
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| 5 - Truck Tractor | | 5 - Military | | 5 - Oxidizer/Peroxide | | 5 - 4-Wheel Trailer | | 5 - Tires | | 5 - Tires | | 5 - Tires | | | |
| 6 - Other Truck | | 6 - Taxi | | 6 - Poison | | 6 - Boat Trailer | | 6 - Exhaust | | 6 - Exhaust | | 6 - Exhaust | | | |
| 7 - Comm. Bus | | 7 - Transport Prop. | | 7 - Radioactive Matl. | | 7 - Camper Trailer | | 7 - Lights | | 7 - Lights | | 7 - Lights | | | |
| 8 - School Bus | | 8 - Agriculture | | 8 - Corrosive Material | | 8 - Towed Vehicle | | 8 - Turn Signal | | 8 - Turn Signal | | 8 - Turn Signal | | | |
| 9 - Other Bus | | 9 - Wrecker/Tow | | 9 - Other | | 9 - Tanker | | 9 - Fuel System | | 9 - Fuel System | | 9 - Fuel System | | | |
| 10 - Motorcycle | | | | | | 10 - Pole Trailer | | 10 - Unknown | | 10 - Unknown | | 10 - Unknown | | | |
| Speed Limit | | Est. Speed | | Citation Offense Charged | | Damage | | Vehicle Towed Away? | | Occupants in Unit | | Enter Point of Initial Impact | | | |
| 55 MPH | | 50 MPH | | NONE | | 1 - None Visible | | Yes | | 1 | | 15 | | | |
| Vehicle Towed By Whom: | | To Where: | | | | 2 - Not Disabled | | No | | | | | | | |
| JORDANS (ROT) | | JORDANS (LOCAL) | | | | 3 - Disabled | | No | | | | | | | |
| Contributing Circumstances | | Driver's Action | | Pedestrian's Action | | | | | | | | | | | |
| 01 - Improper Passing | | 01 - Go Straight Ahead | | 01 - Cross Front-Intersection | | | | | | | | | | | |
| 02 - Improper Lane Change/Use | | 02 - Pass on Left | | 02 - Cross Front-Other | | | | | | | | | | | |
| 03 - Improper Turn/Use | | 03 - Pass on Right | | 03 - Work in Road-With Traffic | | | | | | | | | | | |
| 04 - Following Too Close | | 04 - Pass on Right | | 04 - Work in Road-Against Traffic | | | | | | | | | | | |
| 05 - Improper Passing | | 05 - Go Straight Ahead | | 05 - Work in Road-Against Traffic | | | | | | | | | | | |
| 06 - Improper Passing | | 06 - Go Straight Ahead | | 06 - Work in Road-Against Traffic | | | | | | | | | | | |
| 07 - Improper Passing | | 07 - Go Straight Ahead | | 07 - Work in Road-Against Traffic | | | | | | | | | | | |
| 08 - Improper Passing | | 08 - Go Straight Ahead | | 08 - Work in Road-Against Traffic | | | | | | | | | | | |
| 09 - Improper Passing | | 09 - Go Straight Ahead | | 09 - Work in Road-Against Traffic | | | | | | | | | | | |
| 10 - Improper Passing | | 10 - Go Straight Ahead | | 10 - Work in Road-Against Traffic | | | | | | | | | | | |

| SEATING | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">1</td> <td style="width: 10%;">2</td> <td style="width: 10%;">3</td> <td style="width: 10%;">10</td> </tr> <tr> <td style="width: 10%;">4</td> <td style="width: 10%;">5</td> <td style="width: 10%;">6</td> <td style="width: 10%;">11</td> </tr> <tr> <td style="width: 10%;">7</td> <td style="width: 10%;">8</td> <td style="width: 10%;">9</td> <td></td> </tr> </table> </div> <div style="width: 45%;"> <p style="text-align: center;">Other Involved Unit (Circle One)</p> <p>12 - Pedestrian 13 - Rider of Domestic Animal 14 - Occ. of Non-Motorized Vehicle 15 - Victim of Other Circumstance/ Codes Not Applicable</p> <p>Other Involved Safety Equipment</p> </div> </div> | | | | | | | | | | 1 | 2 | 3 | 10 | 4 | 5 | 6 | 11 | 7 | 8 | 9 | | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">1</td> <td style="width: 10%;">2</td> <td style="width: 10%;">3</td> <td style="width: 10%;">10</td> </tr> <tr> <td style="width: 10%;">4</td> <td style="width: 10%;">5</td> <td style="width: 10%;">6</td> <td style="width: 10%;">11</td> </tr> <tr> <td style="width: 10%;">7</td> <td style="width: 10%;">8</td> <td style="width: 10%;">9</td> <td></td> </tr> </table> </div> <div style="width: 45%;"> <p style="text-align: center;">Other Involved Unit (Circle One)</p> <p>12 - Pedestrian 13 - Rider of Domestic Animal 14 - Occ. of Non-Motorized Vehicle 15 - Victim of Other Circumstance/ Codes Not Applicable</p> <p>Other Involved Safety Equipment</p> </div> </div> | | | | | | | | | | 1 | 2 | 3 | 10 | 4 | 5 | 6 | 11 | 7 | 8 | 9 | | <p style="text-align: center;">CODES</p> <p style="text-align: center;">SAFETY EQUIPMENT</p> <p>01 - None Issued 02 - Not Applicable 03 - Unknown (Any Type) Lap Belt Only 11 - Fastened 12 - Not Fastened Lap/Shoulder Harness 21 - Lap Belt Used 22 - Not Used 23 - Shoulder Only Used 24 - Both Used Motorcycle Helmet 31 - None Used 32 - Used Air Bags 41 - Deployed, Belts Used 42 - Not Deployed, Belts Used 43 - Deployed, Belts Not Used 44 - Not Deployed, Belts Not Used Child Restraints 51 - Child Restraint Used 52 - Other Restraint Used 53 - None Used Petal Cycle/Pedestrian 91 - Contrasting Clothing 92 - Non-contrasting Clothing</p> | | | | | | | | | |
|---|--|---|---|------------------------------------|---|---|--|------------------------------|--|--|---|----------------------|-----------|---|------------------------------------|-----------------|-----------|------------------------------|---|--------|---------------------------|----------------------|--|---|------------------------------------|---|---|---|--|--|---|---|---|---|--|----|---|---|---|----|---|---|---|--|--|--|--|--|--|--|--|--|--|--|
| | 1 | 2 | 3 | 10 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | 5 | 6 | 11 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | 8 | 9 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 2 | 3 | 10 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | 5 | 6 | 11 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | 8 | 9 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VICTIMS | <p>Name: <u>MICHAEL ADKINS, 452 S MAIN ST, BRUNNIDGE AL</u></p> <p>Address: <u>EDGE REGIONAL MEDICAL CENTER</u></p> <p>Taken To: _____ Taken By: _____</p> | | | | | | | | | | <p>Unit No: <u>2</u> Seat Pos: <u>10</u> Injury Type: <u>C</u> Age: <u>48</u> Sex: <u>M</u> Ejection: <u>F</u> First Aid By: <u>M</u></p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <p>Name: _____ Address: _____</p> <p>Taken To: _____ Taken By: _____</p> | | | | | | | | | | <p>Unit No: _____ Seat Pos: _____ Injury Type: _____ Age: _____ Sex: _____ Ejection: _____ First Aid By: _____</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p style="text-align: center;">CODES</p> <p>K - Killed B - Bruise/Abrasion/Swelling A - Visible or Carried from Scene C - Not Visible - Has Pain/Faint N - Not F - Fully P - Partially Ejected 1 - Trapped U - Unknown A - Not Applicable A - Ambulance Attended O - Doctor First Aid By M - Paramedic O - Other P - Police U - Unknown N - None</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NARRATIVE AND DIAGRAM | | | | | | | | | | <p style="text-align: right;">(NOT TO SCALE)</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | <p>US HWY 231 SOUTHBOUND LANES ROAD WIDTH 24'</p> <p>Officer's Opinion of What Happened: <u>UNIT 1 WAS IN THE MIDDLE TURN LANE OF US HWY 231 (SOUTHBOUND) WAITING FOR TRAFFIC TO CLEAR. SHE THEN ENTERED THE LEFT SOUTHBOUND LANE AND STARTED TRAVELLING SOUTH. SHE THEN CHANGED LANES TO THE RIGHT CAUSING UNIT 2 WHICH WAS A MOTORCYCLE TO COLLIDE WITH UNIT 1 IN THE REAR. THE DRIVER OF UNIT 2 WAS KILLED BUT NOT SERIOUSLY INJURED. UNIT 1 NEVER SAW UNIT 2.</u></p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ROADWAY ENVIRONMENT | | | | | | | | | | <p>For Each Roadway Environment Field, Circle One Entry for Each Involved Unit:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Unit 1</th> <th>Contributing Road Defects</th> <th>Surface Construction</th> <th>Condition</th> <th>Accident to Or Related To Road Construction Zone?</th> <th>Material in Roadway (Contributing)</th> <th>Material Source</th> <th>Character</th> </tr> <tr> <td>1</td> <td>1 - Shoulders Low 2 - Shoulders High 3 - Holes, Bumps, Etc. 8 - Other</td> <td>1 - Asphalt 2 - Concrete 3 - Brick 4 - Unpaved 8 - Other</td> <td>1 - Dry 2 - Wet 3 - Ice 4 - Snowy/Slushy 5 - Muddy 8 - Other</td> <td>Yes No</td> <td>1 - None 2 - Rocks 3 - Trees/Limbs 4 - Dirt 5 - Gravel 6 - Oil/Petrol 8 - Other</td> <td>1 - Not Applicable 2 - Natural Environment 3 - Dropped from Vehicle 4 - Already in Road, But Fell From Vehicle 8 - Other 9 - Unknown</td> <td>1 - Straight-Level 2 - Straight-Down Grade 3 - Straight-Up Grade 4 - Straight-Hillcrest 5 - Curve-Level 6 - Curve-Down Grade 7 - Curve-Up Grade 8 - Curve-Hillcrest</td> </tr> </table> | | | | | | | | | | Unit 1 | Contributing Road Defects | Surface Construction | Condition | Accident to Or Related To Road Construction Zone? | Material in Roadway (Contributing) | Material Source | Character | 1 | 1 - Shoulders Low 2 - Shoulders High 3 - Holes, Bumps, Etc. 8 - Other | 1 - Asphalt 2 - Concrete 3 - Brick 4 - Unpaved 8 - Other | 1 - Dry 2 - Wet 3 - Ice 4 - Snowy/Slushy 5 - Muddy 8 - Other | Yes No | 1 - None 2 - Rocks 3 - Trees/Limbs 4 - Dirt 5 - Gravel 6 - Oil/Petrol 8 - Other | 1 - Not Applicable 2 - Natural Environment 3 - Dropped from Vehicle 4 - Already in Road, But Fell From Vehicle 8 - Other 9 - Unknown | 1 - Straight-Level 2 - Straight-Down Grade 3 - Straight-Up Grade 4 - Straight-Hillcrest 5 - Curve-Level 6 - Curve-Down Grade 7 - Curve-Up Grade 8 - Curve-Hillcrest | | | | | | | | | | | | | | | | | | | |
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| INVESTIGATION | | | | | | | | | | <p>Light: 1 - Daylight 2 - Dawn 3 - Dusk 4 - Darkness—Road Not Lit 5 - Darkness—Road Lit</p> <p>Weather: 1 - Clear 2 - Cloudy 3 - Rain 4 - Snow 5 - Sleet/Hail 6 - Crosswind 7 - Fog 8 - Other</p> <p>Locale: 1 - Open Country 2 - Residential 3 - Shop or Business 4 - Mfg. or Industrial 5 - School 6 - Playground 8 - Other</p> <p>Non-Vehicular Property Damage: 1 - None Visible 2 - Light 3 - Moderate 4 - Severe</p> <p>Property Damage Description: <u>NA</u></p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | <p>Time Police Notified: <u>1929</u> AM/PM: <u>PM</u> Time Police Arrived: <u>1933</u> AM/PM: <u>PM</u> Time EMS Arrived: <u>1940</u> AM/PM: <u>PM</u> Name of Photographer: <u>NA</u></p> <p>Witness Full Name: <u>RANDALL JACKSON</u> Address: <u>6326 WASHINGTON ST, ATLANTA GA 30320</u> Telephone: <u>(404) 541-1742</u></p> <p>Witness Full Name: <u>RAHNE PETHINGS</u> Address: <u>6037 HWY 125, BRUNNIDGE AL</u> Telephone: <u>(334) 735-2490</u></p> <p>Name of Investigating Officer: <u>TPR JIMMY HELMS</u> Officer ID: <u>758</u> Agency: <u>ALABAMA</u></p> <p>Name of Other Investigating Officer(s) at Scene: _____ Officer ID: _____ Agency: _____</p> <p>Supervisor Reviewed: _____</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

The data on this report reflects my best knowledge, opinion and belief covering the accident, but no warrant is made as to the factual accuracy thereof.

Date: 3-7-05



ALABAMA

DEPARTMENT OF FORENSIC SCIENCES

P.O. BOX 7925
MOBILE, ALABAMA 36670
(251) 471-7026

2451 FILLINGIM STREET
MOBILE, ALABAMA 36617
FACSIMILE (251) 470-5816

EVIDENCE RECEIPT

CASE NUMBER: 05MB04083

ID: 1 TYPE: Traffic / non-death

REFERENCES:

LAB: MB

AGENCY NUMBER:

ORI NUMBER: AL055TPRS DATE: 4/7/05

TIME: 3:10 pm

| CASE NAMES | TYPE | RACE | SEX | DOB | AGE | STATUS |
|------------------|------|------|-----|-----|-----|--------|
| CHRISTY CHAMPION | S | W | F | | | |

CHAIN OF CUSTODY

DATE

TIME

Secured at Mobile Regional Laboratory Evidence Intake Area

4/7/05

3:10 pm

DESCRIPTION OF EVIDENCE:

1 One biological specimens kit identified to contain Toxicology specimens described as : (sealed) eight sealed tubes of blood labeled Christy Champion, 3/7/05 2125; and one sealed plastic container of urine labeled Champion, Christy L. 3/07/05 2120.

SERVICE REQUESTED:

TOXICOLOGY

ALL ITEMS LISTED ABOVE ARE AS DESCRIBED BY THE SUBMITTING AGENCY AND ARE SUBJECT TO VERIFICATION UPON INSPECTION BY THE ANALYST

REPORT TO:

Trooper Cook
PIKE CO TROOPERS

SUBMITTED BY:

Wann Stewart

TRAFFIC PATROL DIVISION
TRAFFIC HOMICIDE UNIT

Trooper Stewart

DATE:

LOG #:

Page 1 of 1

DFITHI

DPS-30
Rev. 11-72

WAIVER OF COUNSEL

PLACE EDGE REGIONAL MEDICAL CENTER

DATE 3-7-05

TIME 21:15

Before we ask you any questions, you must understand your rights:

1. You have the right to remain silent.
2. Anything you say can and will be used against you in court.
3. You have the right to talk to a lawyer for advice before we ask you any questions and to have him with you during questioning.
4. If you cannot afford a lawyer, one will be appointed without cost to you before any questioning if you wish.
5. If you decide to answer questions now without a lawyer present, you will still have the right to stop answering at any time you wish.

WAIVER OF RIGHTS.

I have read this statement of my rights and I understand what my rights are. I am willing to make a statement and answer questions. I do not want a lawyer at this time. I understand and know what I am doing. No promises or threats have been made to me and no pressure or coercion of any kind has been used against me.

Signed Christy Champion
Date 3-7-5

Witness Ayohona RA
Witness _____

HIGHWAY PATROL DIVISION
TRAFFIC/HOMICIDE UNIT
DATE: _____
LOG #: _____

**VOLUNTARY CONSENT FOR A
BLOOD AND URINE TEST**

I CHRISTY LEANN CHAMPION do hereby agree to voluntarily allow samples of my blood and urine to be taken for the purpose of analysis by the Alabama Department Of Forensic Science in determining the alcohol and drug content of the samples. I agree to give this voluntary consent after being ask by TROOPER JIMMY HELMS #753, a law enforcement officer, to voluntarily give these samples and agree that no threats, promises or coercion have been made against me in any manner. I understand the samples will be drawn by medical personnel using normal medical procedures and the samples will then be turned over to the requesting law enforcement officer for transportation to the Alabama Department Of Forensic Science for analysis.

x Christy Champion

DATE: 3-7-05 TIME: 21:17

WITNESS: Aganor Ra

WITNESS: _____

WITNESS: _____

REQUESTING OFFICER: TPR J #753

AGENCY: STATE TROOPERS

SAMPLE CHAIN OF CUSTODY

DATE DRAWN _____ TIME _____

CLEANSING METHOD USED: _____

PERSON DRAWING SAMPLE: _____

TITLE: _____

HIGHWAY PATROL DIVISION
TRAFFIC HOMICIDE UNIT

DATE: _____

LOG #: _____